

Alameda County Homelessness Response System Written Standards



Alameda County
Health Care Services Agency

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1. USING THE WRITTEN STANDARDS

1.1. Purpose of Written Standards

The purpose of this manual is to provide a general overview of expectations and standards for Alameda County's homelessness response system. This includes minimum requirements for each type of program in the system. The primary intended audience for these standards are Alameda County-based providers of homeless housing and services who receive Continuum of Care (CoC), State of California or local funding as described below, and local funders of homeless services. Other audiences include users of services and the community at large. However, other documents are in development for these audiences that are better suited to describe the homelessness response system.

Alameda County has developed these standards for three reasons. First, it is important that all programs in the County's homelessness response system operate according to applicable laws, follow best practices, and offer fairness and consistency for all people seeking and receiving services. This policy document helps ensure that is the case.

Second, Alameda County receives funding from the U.S. Department of Housing and Urban Development (HUD) to provide programs and services for people experiencing homelessness, including Emergency Solutions Grant (ESG) and Continuum of Care (CoC) funding.¹ This funding requires recipients to adopt written policies and procedures, covering:

1. Who is eligible for specific services (e.g., outreach, homelessness prevention, emergency shelter, transitional housing, Rapid Rehousing and permanent supportive housing);
2. How the system of care ensures that the people most in need get priority for each service;
3. The referral, admission and discharge processes for emergency shelters;
4. Rules regarding how much participants in rental assistance programs must pay toward their rent, and how long they may receive rental assistance;
5. Rules regarding limits on assistance provided for housing relocation (moving costs), or temporary rental assistance provided as part of a Rapid Rehousing program;
6. How programs serving homeless people coordinate with other programs in the homelessness response system and with other types of services (e.g., benefits programs, health care, employment, education); and
7. Policies used to ensure safety for victims of domestic violence, dating violence, sexual assault, and stalking, including rights to emergency transfers when needed to remain safe.

These standards respond to those Federal requirements.

Third, this manual explains requirements for programs that do not currently receive federal funding but are also existing or planned programs in the Alameda County homelessness response system. These programs receive homelessness-specific County funding and must also follow the requirements described in this manual that apply to them.

¹ See 24 CFR Part 576 §576.000(e)(3) (ESG) and 24 CFR Part 578 §578.7 (CoC).

Compliance with these written standards is an element of what local funding agencies monitor contracts for and hold providers accountable to. These standards are expected to be incorporated by reference into contracts and made available to all agencies that apply for relevant funding. Full monitoring policies and protocols are developed and implemented by each funding agency and may vary based on community and funding source.

1.2. Developing the Written Standards

The County's Office of Homeless Care and Coordination (OHCC) developed these standards in collaboration with the Oakland/Alameda County Continuum of Care (CoC).

Representatives of key Alameda County departments and cities also reviewed drafts. A committee focused on racial equity and a group of persons with lived experience of homelessness reviewed the draft standards before their publication for public comment and additions and edits were made based on this feedback. The draft standards were posted to the OHCC website and a 30-day public comment period was held between December 22, 2022 and January 23, 2022. Changes made after public comment were highlighted to the CoC which approved adoption of the standards on February 15, 2023.

1.3. Updating the Written Standards

The Office of Homeless Care and Coordination, on behalf of the Continuum of Care, will update the written standards as needed to stay current with significant program changes, new funding sources and/or new program models. With notification, OHCC may make amendments required by a funding source to ensure compliance with regulations without a formal review process. The CoC should review and approve all other changes, with specific review by providers, persons with lived experience and experts in racial equity whenever possible. OHCC will review the entire policy document and propose any updates or changes on an annual basis.

2. HOMELESSNESS RESPONSE SYSTEM (HRS) OVERVIEW

2.1. System Description

The homelessness response system (HRS) is Alameda County's overall system of housing services and programs to prevent and end homelessness. It includes a range of program types that the County and cities operate directly as well as those operated in partnership with contracted providers. The system also includes governance and oversight, planning, day-to-day administration and operations, and data systems for tracking system usage and outcomes.

Alameda County's homelessness response system includes the following five activity and program types with the goals of preventing, quickly resolving, and preventing returns to homelessness for persons in need of assistance.

- **Prevention** activities provide emergency assistance for people at-risk of experiencing homelessness. Prevention incorporates activities from Housing Problem Solving and rapid resolution (also known as diversion), to legal and financial assistance to avoid eviction, to relocation (moving) assistance.
- **Outreach and Coordinated Entry Services** include activities that reach people experiencing homelessness, provide for basic needs and/or connect them to the rest

of the resources and services available within the homelessness response system and in the broader community.

- **Interim Housing** includes a range of emergency shelter and transitional housing for those with no other place to stay until they secure more permanent housing. Interim Housing includes services to help each individual and family permanently resolve their housing crisis.
- **Permanent Housing** assistance includes support securing and remaining in safe, affordable permanent housing appropriate to the needs of each individual and family. This may include temporary or ongoing rent subsidies, priority access to Public Housing or other affordable housing opportunities, and Permanent Supportive Housing with services for persons with disabilities.
- **Support for Long-Term Housing Stability** assistance includes linkage to mainstream benefits and services as well as wrap-around services specifically designed to help people maintain their housing and lead healthy, thriving lives in the community.

Figure 1: Core Functions and Interventions of the Alameda County Homelessness Response System

Core Function	Prevention	Outreach and Coordinated Entry Services	Interim Housing	Permanent Housing	Support for Long-Term Housing Stability
Interventions	<ul style="list-style-type: none"> ○ Housing Problem Solving ○ Flexible Funds ○ Rapid Resolution/ Diversion ○ Eviction Prevention ○ Relocation Assistance ○ Short/ Medium Term Rental Assistance 	<ul style="list-style-type: none"> ○ Street Outreach ○ Street Health ○ Coordinated Entry Services ○ Housing Resource Centers ○ County-wide Call Center 	<ul style="list-style-type: none"> ○ Emergency Shelter (including Navigation Centers) ○ Safe Parking ○ Transitional Housing 	<ul style="list-style-type: none"> ○ Rapid Rehousing ○ Dedicated Affordable Housing ○ Shallow Subsidies ○ Permanent Supportive Housing 	<ul style="list-style-type: none"> ○ Linkages to Mainstream Services ○ Housing Tenancy and Sustaining Services

2.2. Leadership and Oversight (Governance)

2.2.1. Continuum of Care (CoC)

The U.S. Department of Housing and Urban Development (HUD) requires communities to establish a Continuum of Care (CoC) planning body in order to receive federal homeless assistance funding. The CoC general membership includes representatives from nonprofit homeless assistance providers, victim services providers, faith-based organizations, governments, businesses, and advocates, and people with lived experience of homelessness. The Berkley/Oakland/Alameda County CoC is the formal

name of Alameda County's Continuum of Care and represents all of the County's cities as well as its unincorporated areas.

Continuums of Care are required by regulation to be responsible for the following:

- *Continuum of Care Operations*: Hold meetings, inviting new members, develop a governance charter, set performance targets for the system, establish a Coordinated Entry System, and develop and adopt written standards for the system (this document).
- *Design and Operation of the Homeless Management Information System (HMIS)*: Appoint an HMIS Lead, establish the privacy plan, security plan, and data quality plan, and ensure compliance with HUD requirements.
- *Continuum of Care Planning*: Coordinate the implementation of a housing and service system that meets the needs of homeless individuals and families, plan and conduct a biennial point-in-time count of homeless persons, and conduct annual gaps analysis of the homeless needs and services available.
- *Annual CoC Funding Process*: Conduct the annual process by which the CoC develops and submits applications for HUD CoC funding.
- *Designate key roles*: Determine which organizations will fill specific roles such as the named Collaborative Applicant for HUD CoC funding, the HMIS Lead and Coordinated Entry Management Entity.

2.2.2. Alameda County roles related to the CoC

Alameda County plays certain key and designated roles on behalf of the Continuum of Care (CoC) which are relevant to the use and application of these standards. These roles are described further in the CoC Governance Charter. These roles include:

1. **Collaborative Applicant**: Alameda County serves as the Collaborative Applicant designated by the CoC Leadership Board. As the Collaborative Applicant, Alameda County works with service providers to submit the annual application to HUD for CoC program funds, applies to HUD for CoC Planning Grant funds on behalf of the CoC, and serves as the recipient of HUD Planning Grant funds on behalf of the CoC.
2. **Homeless Management Information System (HMIS) Administrator**: Alameda County serves as the HMIS Administrator designated by the CoC Leadership Board. As the HMIS Administrator, Alameda County is responsible for implementation and administration of the data system which includes developing and maintaining policies and procedures, developing and delivering training, and reporting requirements.
3. **Coordinated Entry Management Entity**: Alameda County is the Coordinated Entry "Management Entity" designated by the CoC Leadership Board. As the Management Entity, it is responsible for the day-to-day operations of the Coordinated Entry System. This includes maintaining standardized screening and assessment processes, training users of the system, and monitoring usage of the system.

In addition to the CoC services, Alameda County is a funder of homeless services and housing and applies these standards to the programs it funds, as described above.

2.3. Home Together 2026 Community Plan Framework

The [Home Together 2026 Community Plan](#) is Alameda County's plan to dramatically reduce homelessness in Alameda County by 2026 and address the fact that people of color have historically experienced and are currently experiencing homelessness at vastly disproportionate rates. It details the goals, strategies and funding needed to achieve these important priorities.

Specifically, the Plan calls for expansion of resources and specific action steps in four categories:

1. Prevent Homelessness for our Residents
2. Connect People to Shelter and Needed Resources
3. Increase Housing Solutions
4. Strengthen Coordination, Communication and Capacity

A key theme throughout the *Home Together Plan* is how the homelessness response system must provide fair and equitable access to housing and services for all persons served. This includes expanding access to historically underserved neighborhoods, ensuring racial equity in referrals to and placement in programs and services, developing new types of interventions based on input from underserved populations, and using data to track racial equity impacts.

2.4. Performance Goals & Indicators

Alameda County's homelessness response system has adopted the Results Based Accountability (RBA) framework to measure the number of people served, the quality of the services provided and the outcomes of those services. RBA helps the system of care use data to evaluate performance and make decisions about programs and funding in the future. The Continuum of Care (CoC) has developed system-level key indicators and performance measures as well as performance measures for many of the program types described in these standards. Where applicable, these measures are incorporated by reference.

Provider level data available can be accessed at the [Practitioner Scorecard site](#).

2.5. Federally funded Program Information

Many sources of funding help support the homelessness response system in Alameda County. These include federal funds that are targeted to address homelessness and come with specific regulations and requirements in law including the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 and all related regulations put forward by the U.S. Department of Housing and Urban Development (HUD), including the Continuum of Care (CoC) Interim Rule (24 CFR Part 578) and the Emergency Solutions Grants (ESG) Interim Rule (24 CFR Part 576).

Emergency Solutions Grants (ESG) funding can support street outreach, emergency shelter, homelessness prevention, and Rapid Rehousing assistance, as well as data collection through a local Homeless Management Information System (HMIS). ESG funds are allocated by formula and directly awarded by HUD to the cities of Berkeley, Oakland and the County for the Urban County. The State of California also receives an allocation of ESG and provides a portion to Alameda County as a passthrough grant intended to cover the rest of the cities in the county.

Continuum of Care (CoC) funding can support permanent housing (including Permanent Supportive Housing and Rapid Re-Housing), transitional housing, and supportive services only programs, as well as data collection through a local HMIS and administrative activities. CoC funding is awarded through an annual national competition and funds go to a variety of entities including Alameda County, some cities and nonprofit organizations.

3. STANDARDS APPLICABLE TO ALL SYSTEM COMPONENTS

3.1. Non-Discrimination

3.1.1. Federal Non Discrimination Laws and Requirements

All programs must follow all non-discrimination laws designed to ensure universal and equitable access to the homelessness response system for all people experiencing homelessness in the County regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual identity, or gender identity. All programs must have policies on nondiscrimination.

Recipients and subrecipients of CoC program and ESG program-funded projects must comply with the nondiscrimination and equal opportunity provisions of Federal civil rights laws, including, but not limited to the following: ²

- Fair Housing Act prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, or familial status;
- Section 504 of the Rehabilitation Act prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance;
- Title VI of the Civil Rights Act prohibits discrimination on the basis of race, color or national origin under any program or activity receiving Federal financial assistance; and
- Title II of the Americans with Disabilities Act prohibits public entities, which includes state and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs, and activities, which include housing, and housing-related services such as housing search and referral assistance.
- Title III of the Americans with Disabilities Act prohibits private entities that own, lease, and operate places of public accommodation, which include shelters, social

² As specified at 24 C.F.R. 5.105(a)

service establishments, and other public accommodations providing housing, from discriminating on the basis of disability.

In addition, specific Fair housing provisions apply to Federal CoC, ESG, and HOPWA funding and are listed in those regulations.³ In addition to these Federal laws, programs covered under these written standards must also follow all similar applicable California laws including, but not limited to, the [Fair Employment and Housing Act](#), the [Unruh Civil Rights Act](#) and the [Transitional Housing Participant Misconduct Act](#).

3.3.2 Fair Chance to Access Housing

Persons with histories of homelessness may also have histories with the criminal legal system, and persons with criminal legal system histories often face discrimination in the housing market. Cities within Alameda County have adopted ordinances that prohibit this type of discrimination. Ordinances in effect in the cities of Berkeley and Oakland prohibit rental property owners from asking about or using criminal history and/or criminal background checks in their rental housing advertising, applications, tenant selection process, or decision-making. Specifically, rental housing providers are not allowed to:

1. Inquire about criminal history
2. Indicate that persons with criminal backgrounds will not be considered for housing, including in rental advertisements, application materials, or verbally
3. Refuse to rent or terminate a tenancy based on criminal history
4. Require disclosure or authorization for release of criminal history
5. Demand higher security deposit or rental amount based on criminal history
6. Refuse to allow the addition of an immediate family member based on the family member's criminal history
7. Disqualify tenants from rental assistance programs such as Section 8 based on criminal history (subject to certain exceptions as listed in the ordinances - [Oakland](#); [Berkeley](#))
8. Take any other negative action against applicants/tenants based on criminal history

In alignment with the goals of the Fair Chance ordinances in place in the cities of Berkeley and Oakland, *all* contracted providers of housing covered under these standards should not add any additional restrictions that would lead to a person being denied from housing or services based solely on history with the criminal legal system, unless a project or program has a specific public funding source that requires verification of, or eligibility based on criminal legal status. In these cases, the provider shall apply only those criteria that are required to be in funding compliance and shall seek to have the least negative impact on persons with criminal legal histories. This prohibition does not apply to private landlords who are not currently covered by a Fair Chance ordinance in their geography. Nothing in this language should be interpreted to prohibit a program from being designed or permitted to specifically serve persons with prior criminal legal system involvement.

³ See 24 CFR 578.93 (CoC), 24 CFR 576.407(a) and (b) (ESG), and 24 CFR 574.603 (HOPWA).

3.2. Promoting Racial Equity and Addressing Systemic Racism and Bias

As reflected in the Home Together Plan, Homelessness in Alameda County, as across the United States, affects different communities differently, with many groups, particularly Black and Indigenous people, being vastly more likely to experience homelessness and to return to homelessness after receiving assistance. Achieving racial equity not only requires ensuring that the system and its programs do not discriminate, but that the system and programs are designed to address the impact of structural racism and the disparate impacts on racial groups and to achieve greater racial equity.

The Homelessness Response System must include race equity as a central consideration in its approach to program design and evaluation. This includes recognizing the impact of structural racism and bias on homelessness and the people who experience it and reflecting these realities in design and targeting of programs. It also includes ensuring that data is collected at the system and program levels that allow examination of the impact of the service or resource provided and the intersection of those outcomes with race and ethnicity. Programs funded by the CoC are expected to track data on their services by race, ethnicity and other demographic considerations and to evaluate their impact. In particular, attention should be paid to differences in length of time homeless and in the rates at which people become homeless again, as these have been repeatedly shown to be greater for Black and Indigenous people.

As initiatives and programs are developed or renewed, service expectations and tracking requirements to center racial equity will be added and these will be applicable to the system as a whole and to all programs within it.

At a program level, provider organizations are expected to consider the current and historic impacts of structural racism and the need to highlight and focus on greater racial equity in their program strategies. This includes implementing channels for feedback, culturally affirmative services, and ensuring that people from communities most impacted by homelessness are involved in decision making.

As training and materials become available related to anti-racism, providers may be required to participate in such training and to make plans within their programs and organizations to address the impact of structural racism and bias.

3.3. Participation of Persons with Lived Experience of Homelessness

The perspectives of persons experiencing homelessness or who have been previously homeless are needed to ensure that the system and its programs appropriately and respectfully address the needs and experiences of their participants. The system will ensure the inclusion of people with lived experience (PWLE) at all levels of governance including on the Continuum of Care board and in standing and ad-hoc committees. System level policy documents (such as these written standards) will be made available for review and input by PWLE before finalization. Wherever possible, PWLE are also to be part of funding decision-making and evaluation, including as part of the annual evaluation of Coordinated Entry, the CoC NOFO Committee, and other funding and evaluation panels. Efforts to secure and support the participation of PWLE

should be reflect the diversity within the population that experiences homelessness and ensure participation by BIPOC and disabled PWLE.

At the program level, Provider organizations are expected to create their own plans and strategies for incorporating the perspectives of PWLE. This may include, but is not limited to:

- Including PWLE on their Board of Directors and/or on Program level advisory boards (this is required for CoC funded programs);
- Establishing program- or agency- level advisory boards specifically composed of PWLE who may be current or past clients of the agency and who also participate in the broader governance;
- Surveying program participants regularly for their feedback on the programs they have participated in;
- Recruiting, hiring and actively supporting PWLE to work at all levels within their organization, including providing appropriate training and opportunities for advancement.

As the CoC develops best practices and policies related to the greater incorporation of PWLE in the governance and oversight of the system, additional requirements of programs may be added.

3.4. Reasonable Accommodation

Any person with a disability seeking or receiving assistance from the homelessness response system has the right to request a reasonable accommodation. Disabilities are not limited to physical or visible disabilities and also include mental health disabilities and conditions such as Post-Traumatic Stress Disorder (PTSD.)

All programs must have policies on reasonable accommodation and make modifications to their services to make the services usable by people with disabilities, unless the accommodation would change the basic nature and purpose of the program.

3.4.1. Reasonable Accommodation in the application process

If an applicant with disabilities who would otherwise have their application denied based on the provider's screening criteria requests a reasonable accommodation and submits other information about mitigating circumstances, the provider must consider the information presented. If the applicant's claim of mitigating circumstances is based on a disability, the housing provider may make inquiries about the applicant's assertions and request verification, but only to the extent necessary to confirm the applicant's claims.

3.4.2. Reasonable Accommodations and Reasonable Modifications in a housing program

Reasonable accommodation and reasonable modifications in housing may include accommodations that are:

- Physical: Alterations to units or common areas (for example, the installation of grab bars in a bathroom or a strobe light doorbell for a deaf or hard of hearing tenant).

- Sharing information: Programs may make their written materials and other information available in Braille, large print, or on audio-tape for blind or low vision residents, or through a sign language interpreter for deaf or hard of hearing tenants.
- Policies/rules: Exceptions to or waivers of certain policies or rules (for example, allowing assistance animals in a building that does not otherwise allow pets or providing additional assistance completing application materials).

The property owner who owns the building will have the obligation to make reasonable changes or allow tenants to make reasonable changes to the unit (such as installing grab bars), common areas (such as widening doorways or ramping), or to policies or procedures (such as waiving a no pet rule) as a reasonable accommodation. If the unit receives a subsidy only, the property owner, while required to allow the accommodation, may not have to pay the cost of implementing the accommodation (depending on the type of subsidy received). Private property owners may also require that the tenant return the unit to its original state upon move out.

In order to deny a request for reasonable accommodation, a housing provider or property owner must demonstrate that the accommodation would pose an undue financial or administrative burden. However, a housing provider does not have to make a change that would fundamentally alter the nature of the program.

Each component within the system of care has to provide reasonable accommodation and disability access. In general, grievances and ADA concerns are handled at the applicable program level. For more information on Reasonable Modifications see the Joint Statement of HUD and the Department of Justice on [Reasonable Modifications Under the Fair Housing Act](#).

3.5. Equal Access Rule

CoC program funded projects serving families must comply with HUD's Equal Access Rule,⁴ which defines "family" as follows:

Family includes, but is not limited to, regardless of marital status, actual or perceived sexual orientation, or gender identity, any group of persons presenting for assistance together with or without children and irrespective of age, relationship, or whether or not a member of the household has a disability. A child who is temporarily away from the home because of placement in foster care is considered a member of the family.

This means that any group of people that present together for assistance and identify themselves as a family, regardless of age or relationship or other factors, are considered to be a family and must receive services together. Involuntarily separating families based on the gender or age of minor children is a violation of HUD regulations.

⁴ See 24 CFR 5.105(a)(2)

3.6. Use of a Homeless Management Information System (HMIS)

The Homeless Management Information System (HMIS) is the centralized system-wide database for collecting information about households who apply for and/or receive services in the homelessness response system. Every Continuum of Care (CoC) must have an HMIS that complies with HUD requirements. Alameda County's HMIS uses Clarity Human Services developed by Bitfocus, Inc.

Programs funded through federal CoC and Emergency Solutions Grant (ESG) funds, except those operated by victim service providers, must participate in HMIS. Alameda County providers receiving homelessness-specific County funding may also have a requirement to participate in HMIS. These programs may include:

- County General Fund
- Homeless Housing, Assistance and Prevention (HHAP) grant program
- Mental Health Services Act (MHSA)
- Community Development Block Grant (CDBG)
- Emergency Housing Vouchers (EHV)
- Projects for Assistance in Transition from Homelessness (PATH)
- Community Mental Health Services Block Grant (MHBG)
- Some Housing Opportunities for Persons with AIDS (HOPWA) funded programs

The County will include such requirements in program contracts where applicable.

Program types that participate in HMIS include Emergency Shelters, Transitional Housing, Permanent Supportive Housing, Homelessness Prevention, Rapid Rehousing, Drop-In Centers, Street Outreach, and Homeless Supportive Services.

In order to participate in HMIS, providers must execute an HMIS Agency Partner Memorandum of Understanding (MOU). Participating provider personnel must have an HMIS license and receive training and sign an HMIS User Agreement and Privacy Agreement.

Please see the [Alameda County Continuum of Care HMIS Policies and Procedures Manual](#) for more information.

3.7. Coordinated Entry

Coordinated Entry (CE) is the process and the system by which the homelessness response system identifies people who are experiencing homelessness, assesses their circumstances and needs, and matches them to programs and services. CE is intended to ensure that homelessness response system participants receive fair and equitable treatment and that limited resources go to those who need them most. As the front door to the homelessness response system, CE serves all of Alameda County through a network of geographically dispersed housing resource centers, mobile outreach teams and the 2-1-1 call center. For more information about access points (including housing resource centers), the Coordinated Entry process, including where to seek assistance, see the [Coordinated Entry Homepage](#).

The U.S. Department of Housing and Urban Development (HUD) requires Continuums of Care (CoCs) to develop and maintain policies and procedures for their CE systems, such as the participant assessment process, how participants receive priority for services, and how the system matches participants and refers them to services. These CE policies and procedures are described and referenced throughout this document. Please [see Alameda County Coordinated Entry Policies](#) for more information.

3.8. Coordination with Mainstream Supportive Services

Providers within the homelessness response system must screen service participants for all “mainstream” benefits and systems and assist them in applying for needed resources. These systems include, but are not limited to:

1. Education: Family and youth serving homelessness response system agencies should assess educational needs at intake, inform families about educational services for which they are eligible, and provide advocacy with school districts to secure desired services, including having established relationships with the McKinney coordinators in each applicable school system or district.
2. Employment: Service coordinators connect participants to available training and employment assistance programs according to their needs and interests. This should include connecting eligible participants seeking employment to the WIOA funded Adult and Dislocated Worker services offered by the Workforce Development Board and connected interest participants with a qualifying mental health condition to Behavioral Health vocational services.
3. Benefits: The CoC directs programs to assess income and non-cash benefits of all participants at intake and upon annual assessment to ensure they know about and are able to access all resources for which they are eligible, including TANF, food stamps, unemployment insurance, Medi-Cal, disability benefits, and Social Security benefits.
4. Behavioral Health: Case managers may refer any participant who needs mental health or substance use services (with their permission) to the centralized intake, assessment and referral point within Alameda County Behavioral Health Care Services (ACBH) for services provided by ACBH or Berkeley Mental Health.
5. Health Care: Providers are expected to ensure that participants have access to health care including having health insurance (see benefits above) and access to primary care. Participants with health insurance that do not have an identified primary care provider should be referred to a Federally Qualified Health Center (FQHC) or other publicly funded clinic.

3.9. Compliance with Housing First Principles and Core Components

Housing First (HF) is an evidence-based, client-centered approach that recognizes housing as necessary to make other voluntary life changes, such as seeking treatment or medical care. This approach is in contrast with the traditional model of rewarding “housing readiness.” The goal of Housing First is to provide housing to individuals and families quickly with as few obstacles as possible, along with voluntary support services according to their needs.

California State law⁵ mandates all state-funded housing programs to utilize Housing First principles. Unless otherwise expressly exempted by contract, these Housing First expectations are also applied through these Written Standards to all programs addressing homelessness funded with Federal and County funding.

State law defines a list of HF practices as “core components” of the Housing First approach. For all programs and the system as a whole, these practices include:

1. Programs and the system use tenant screening and selection practices that promote accepting applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services.
2. Program applicants are not rejected on the basis of poor credit or financial history, poor or lack of rental history, criminal convictions unrelated to tenancy, or behaviors that indicate a lack of “housing readiness.”
3. Supportive services emphasize engagement and problem solving over therapeutic goals and develop service plans that are highly tenant-driven without predetermined goals.
4. Case managers and service providers are trained in and actively employ evidence-based practices for client engagement, including, but not limited to, motivational interviewing and client-centered counseling.

For permanent housing programs, Housing First also requires:

1. Participation in services or program compliance is not a condition of permanent housing tenancy.
2. Tenants have a lease and all the rights and responsibilities of tenancy, as outlined in California’s Civil, Health and Safety, and Government codes.
3. The use of alcohol or drugs in and of itself, without other lease violations, is not a reason for eviction.
4. Tenant selection through Coordinated Entry for supportive housing prioritizes eligible tenants based on criteria other than “first-come-first-serve,” including, but not limited to, the duration or chronicity of homelessness, vulnerability to early mortality, or high utilization of crisis services.
5. Services are informed by a harm-reduction philosophy that recognizes drug and alcohol use and addiction as a part of tenants’ lives, where tenants are engaged in nonjudgmental communication regarding drug and alcohol use, and where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices, as well as connected to evidence-based treatment if the tenant so chooses.

⁵ Please see [Senate Bill \(SB\) 1380](#) (Chapter 847, Statutes of 2016)

3.10. Federally Required Record Keeping

3.10.1. Homeless Status Verification

In order to be eligible for programs with federal funding, participants must have written verification (proof) of their homeless status, and providers must have written intake procedures for collecting this information.

1. Intake procedures must require written confirmation of homelessness from a homeless outreach worker or another housing or service provider (“third-party documentation”). If this is not available, the intake worker can document their own knowledge of the person’s homelessness, or the person experiencing homelessness may self-certify their homeless status.
2. Lack of third-party documentation must not prevent an individual or family from being immediately admitted to emergency shelter, receiving street outreach services, or being immediately admitted to shelter or receiving services provided by a victim service provider.
3. Records contained in the Homeless Management Information System (HMIS) or a comparable database by victim service or legal service providers are acceptable evidence of third-party documentation and intake worker observations, provided the HMIS meets related HUD requirements.⁶
4. Individuals released directly from a hospital, jail/prison, or other institution who were there less than 90 days and who were previously in an emergency shelter or unsheltered, must provide documentation of homelessness immediately prior to entry into the institution. They must also provide documentation of institution entry and exit dates. If someone was in an institution fewer than 90 days, their previous homeless episode still counts toward total time homeless.
5. Other eligibility verification requirements apply to specific populations, such as persons meeting the definition of chronically homeless and persons meeting the definition of at risk of homelessness.⁷

3.10.2. Income Verification

When programs are reserved for persons at or below certain income levels, and/or program participants receive assistance with rent or occupancy charges that is variable depending on their income, the program must keep documentation of annual income in a form approved by the U.S. Department of Housing and Urban Development (HUD).

3.10.3. Program Participant Records

In addition to homeless status verification, providers must also keep records of services and assistance provided to each participant, including performing an annual assessment of services for those program participants that remain in a program more than a year, and where applicable, compliance with appropriate termination of assistance procedures. Records may be kept in HMIS, secure electronic file storage, or paper files kept in a secure location.

⁶ Please see 24 CFR 576.500.

⁷ Please consult 24 CFR 578.103(a)(4) and 24 CFR 576.500(c).

3.11. Termination and Grievance Policies

Programs in the homelessness response system must provide a formal process for terminating assistance to participants who violate program requirements. The program must provide a formal process that recognizes the rights of the participant. This includes:

1. Providing the program participant with a written copy of the program rules and the termination process before the participant begins to receive assistance;
2. Written notice to the program participant containing a clear statement of the reasons for termination;
3. A review of the decision, in which the program participant has 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,
4. Prompt written notice of the final decision to the program participant.

All programs in the homelessness response system must have a written grievance policy and a process for responding to grievances. Programs must make participants aware of the grievance policy and procedures upon entry. All participants have the right to file a grievance regarding any aspect of the program. Any grievance filed must receive a written response from the program.

3.12. Emergency Transfer Plan (as required under the Violence Against Women Act)

Alameda County recognizes that people who are victims of domestic violence, dating violence, sexual assault, stalking or human trafficking have specific concerns around confidentiality and safety. Such persons, which may include adults and emancipated minors, may require an emergency transfer when they feel their current placement puts their safety in jeopardy. Such a transfer may apply to an individual as well as include other members of the household that are not the perpetrator. In compliance with the federal Violence Against Women Act (VAWA), Alameda County is developing an Emergency Transfer Plan that clarifies that victims of domestic violence, dating violence, sexual assault stalking, or human trafficking are eligible for an emergency transfer, the documentation required to request an emergency transfer, confidentiality protections, how an emergency transfer may occur, and guidance on safety and security. All providers of transitional housing, permanent supportive housing, and joint transitional housing and Rapid Rehousing projects must follow the Emergency Transfer Plan once established.

3.13. Training and Participation in Learning Collaboratives

In order to ensure compliance with these standards and with other Federal, State or local regulations, and to promote the use of best practices and ensure quality service delivery across the Continuum of Care and/or the County may establish and require participation in specific training for funded entities. Participation in training may be required before beginning certain projects or roles and may be required at times that practices or policies change or as refreshers over time. Training topics may include but are not limited to training in the use of HMIS; financial tracking and record keeping; Coordinated Entry practices; Housing First requirements; Program standards; Anti-Racism; disability rights, Fair Housing

and reasonable accommodations and modifications; service techniques such as trauma informed care and harm reduction; and other practices and requirements.

Participation in a Learning Collaborative may also be required in order to learn from other organizations and contribute to the development of shared approaches. Such participation should be considered a necessary part of the participating party's job.

4. STANDARDS SPECIFIC TO OUTREACH

4.1. Purpose of Street Outreach

Street outreach is a one-on-one engagement with persons who are unsheltered (living on the street or another place not intended for human beings to live) to help meet basic survival needs, provide education about available programs and services, and make linkages to coordinated entry, primary care, social services, housing, and other services. Outreach "brings the front door" to persons who are unsheltered by providing care directly on the streets and fostering relationships that can allow individuals to consider coming inside and accepting services.

Alameda County has a variety of outreach teams that operate in different regions and/or target specific populations such as Veterans or those with severe mental health symptoms. Health Care for the Homeless Street Health teams provide outreach throughout the County in 14 zones. These teams include social workers, community health outreach workers, nurses, and doctors who provide care on the streets and work to connect people to appropriate services. They provide medical care, harm reduction focused substance use services, intensive case management, and distribute food and hygiene kits at the sites where unsheltered people are living. Coordinated Entry Access Points and city-contracted outreach teams also provide outreach, including basic survival needs and referrals to Coordinated Entry.

County-funded street outreach teams serve as Access Points for Alameda County's Coordinated Entry (CE) system with some able to do the entire range of CE services and some coordinating with Housing Resource Centers for CE services. Street outreach teams play a vital role in the County's work to serve unsheltered individuals living in vehicles, encampments and other unsheltered settings.

4.2. Eligibility and Prioritization

All individuals and families who lack a fixed, regular, and adequate nighttime residence, and are living in places not meant for human beings to live, including on the streets, in encampments, in cars, in parks, and in abandoned buildings are eligible for street outreach services.

Some street outreach programs and teams serve specific target populations such as Veterans, people with serious mental illness or people living in particular encampments, cities or regions. In these cases, such outreach teams may reserve their regular services for eligible persons; however, they should refer other persons to other programs or locations that may serve them if available.

4.3. Referral Process and Enrollment

Outreach teams find and engage participants through going to places where people experiencing homelessness are likely to be found. Some outreach teams also take referrals, for example from city agencies or businesses in certain districts, but this is not required unless part of a contract, and outreach teams may work with any person who they encounter who are unsheltered and eligible for and interested in services. While initial contact and relationship building does not require an enrollment, once a relationship is established enrollment in the Homeless Management Information System (HMIS) in the outreach program should occur to ensure that reporting on outreach is possible.

For any person engaged with an outreach team that wants and needs assistance with housing problem solving, interim, or permanent housing, outreach workers will provide Coordinated Entry services if they are a designated Access Point or will make a referral to a Housing Resource Center for CE services, so that participants have full access to all needed services and resources of the homelessness response system.

4.4. Minimum Standards and Required Services

Outreach includes essential services for people living on the street or in other places not meant for human beings who are unwilling or unable to access emergency shelter, housing, or an appropriate health care facility. Essential services include engagement, distribution of food, clothing, and hygiene kits, and referrals to emergency shelter and housing. In the case of the Street Health Outreach Teams, it can also include health and mental health services (when other appropriate health services are unavailable in the area), transportation, and special or additional services for persons with particular health concerns or during targeted public health campaigns.

Outreach should be flexible and individualized to the unique needs of each person or family served. Engagement should be sensitive to the autonomy and willingness of the person or family to be engaged, delivered in a person-centered and non-directive manner, and persistent until the person is either connected to services or indicates that they do not want to engage further.

4.5. Program Exit and Disenrollment

There is no time limit for outreach services unless specified in a contract by a funding source. Participants may remain enrolled as long as they need services and engaged with outreach services. However, if a participant is not reachable for 90 days, the outreach team should disenroll the participant in HMIS. The participant may have moved out of the area or become enrolled in a different program or service. Disenrolling the participant from HMIS helps ensure accuracy in data collection. Outreach staff should check in at every contact whether a participant has a plan or opportunity for shelter or housing so that their record indicates where they may have gone if they become unreachable.

A successful exit from outreach is when participants move into emergency shelter, transitional housing, or permanent housing. An unsuccessful exit is when a participant's housing status at program exit is still in an unsheltered homeless situation.

4.6. Performance Measures

See Appendix C for applicable performance measures.

INTERIM HOUSING

Interim Housing refers to programs that provide safe temporary places to stay for people experiencing homelessness while they secure permanent housing or other appropriate accommodations such as treatment. Interim Housing may target specific populations, may include specific services and different lengths of stay. All Interim Housing must be low-barrier to entry (without extensive requirements or rules) and must, at a minimum, provide basic needs, housing-focused services, and linkage to voluntary mainstream services.

5. STANDARDS SPECIFIC TO EMERGENCY SHELTER

5.1. Purpose and Types of Emergency Shelter

Emergency Shelters provide low-barrier shelter options for people experiencing homelessness while they seek permanent housing or access to other appropriate programs such as treatment. Emergency Shelter includes the following types of programs and facilities:

1. Congregate Shelters are shelters where guests have shared sleeping areas and shared sanitary facilities.
2. Non-Congregate Shelters are shelters where guests have assigned private sleeping spaces and private or shared sanitary facilities. Project Roomkey and Homekey Interim Housing sites and Community Cabins are Non-Congregate Shelters.
3. Navigation Centers are shelters that offer more intensive services focused on facilitating transition into permanent housing. They are as low barrier as possible. For example, they may permit guests to come and go 24 hours a day, allow partners and/or pets, and/or offer storage for personal belongings.
4. Medical Respite programs offer emergency shelter with specifically targeted services for medically vulnerable persons experiencing homelessness discharged or diverted from a hospital or other healthcare institution. These services are intended to make it possible for persons to be successfully discharged from a higher-level medical setting but may not include 24-hour care or specialized wound care. There are differences between what different respite care settings are able to offer based on configuration and staff, and specific arrangements should be made between medical respite programs and the discharging or referring agencies with which they work to ensure that appropriate care for the individual referred is available.

Alameda County also has several types of population-specific emergency shelter types, including domestic violence (DV) shelters, behavioral health shelters, and Veterans shelters. Some general population shelters may include dedicated beds for specific subpopulations such as Housing Opportunities for Persons with AIDS (HOPWA) funded beds for people with HIV/AIDS.

In addition to the written standards in this policy document, many Alameda County emergency shelter providers must adhere to [Alameda County Emergency Shelter Standards for Year-Round Shelters](#), including hours, voluntary services, staffing requirements, additional requirements for family shelters, food service, and physical plant. Please refer to Appendix C, Alameda County Emergency Shelter Standards for Year-Round Shelters.

5.1.1. Safe Parking

In addition to the shelter types above, Alameda County maintains Safe Parking programs, which are safe and legal places to stay in a vehicle such as a car (or RV, if permitted by specific sites) for those who would rather stay in their vehicle than enter a shelter or are staying in a vehicle until shelter or housing becomes available. Although not all shelter standards apply, Safe Parking programs operate like emergency shelters as much as possible and offer similar services. Some Safe Parking sites are co-located with crisis housing or service centers offering services such as laundry and showers, while others have mobile services that come to them. Persons residing temporarily in a Safe Parking site remain eligible for placement in shelter and housing.

It should be noted that Safe Parking programs require that participant have a working vehicle, a level of resource not all people experiencing homelessness have access to. In particular, Safe Parking programs that restrict access to larger vehicles such as RV's may have racially disparate impacts, as such vehicles may not be as frequently available or affordable to people of color. In designing any new Safe Parking programs, providers and funder must consider the potentially disparate impacts such designs may cause.

5.1.2. "Year-Round" Versus Inclement Weather and "Sheltering Emergency" Shelters
The standards in this policy document are for "Year-Round" emergency shelters and do not apply to Inclement Weather Shelters (sometimes referred to as "Winter Shelters" or "Seasonal Shelters"), which operate during certain times of the year or only when certain weather conditions trigger them to open, or "Sheltering Emergency" shelters operated by FEMA and/or American Red Cross in response to disaster events.

5.2. Eligibility and Prioritization

Year-round emergency shelters funded by federal funding or by Alameda County, and certain city or State funded shelters, may only serve participant households who meet the HUD definition of "literal homelessness." Referrals to these shelters are made through Coordinated Entry. An individual or family must complete a Crisis Assessment, enroll in the Coordinated Entry program in HMIS, and be on the Crisis Queue. Priority for referral is based on the household's Crisis Assessment Score. Factors in the Score include the number and ages of members of the household, income, prior living situation and whether one or more members of the household has a condition, disability (including HIV+) or health need.

Additional eligibility criteria may apply, depending on the program type and/or funding sources; however, shelters should have few to no screening criteria that would screen out otherwise eligible people. Depending on requirements of funders, emergency

shelters may have some beds reserved for referrals from Coordinated Entry and others that receive referrals by other means.

Certain emergency shelter programs funded by Alameda County do not participate in Coordinated Entry because they have other specified referral processes, such as Medical Respite, which prioritizes and refers based on medical need.

Some emergency shelters in Alameda County receive funding from city agencies or private organizations and do not have to accept referrals from Coordinated Entry. These shelters must have clear eligibility and prioritization policies so that individuals know how to access them and other programs know how to make referrals to them.

5.3. Referral Process and Enrollment

For shelters that participate in Coordinated Entry, Housing Resource Centers and other access points match participants to emergency shelter programs from the Crisis Queue in accordance with the Coordinated Entry policies.

All shelters, whether in Coordinated Entry or not, must have clear admission policies that are consistent with these standards, the Coordinated Entry policies and the Alameda County Emergency Shelter Standards, if applicable. Denial of admission to emergency shelter can only be based on specific permitted criteria related to eligibility, certain types of criminal records, restraining orders, violent or threatening behavior, infectious disease, or needs related to assistance with activities of daily living (ADLs). Please refer to Alameda County Emergency Shelter Standards for Year-Round Shelters.

Regardless of whether they must accept Coordinated Entry referrals, all County-funded shelters must use the Homeless Management Information System (HMIS) to enroll and disenroll shelter guests and to complete status and annual assessments as appropriate.

5.4. Minimum Standards and Required Services

Emergency shelters provide safe, decent and supportive places to stay while people experiencing homelessness are looking for a permanent place to live or a more suitable temporary placement such as transitional housing or treatment.

Minimum standards covered in the Alameda County Emergency Shelter Standards for Year-Round Shelters include requirements for safety, privacy, meals or access to food, access to supportive services and physical plant requirements. Shelters that receive County funding must follow these standards and self-monitor to ensure that they meet the County's requirements.

5.5. Program Exit

Emergency shelters may not establish a maximum length of stay for shelter guests unless a funding source requires such a restriction. Nevertheless, shelter stays should be brief, with guests moving on to housing or another longer-term program as quickly as possible. Shelter guests may have an obligation to be engaged in a housing plan and emergency shelters may discharge a resident who repeatedly refuses to work towards a housing plan and/or has refused multiple suitable housing opportunities. Before

discharge for this reason, there must be evidence that shelter staff actively attempted to assist the guest in obtaining housing and that the guest's obstacles were taken into consideration.

5.6. Performance Measures

See Appendix C for applicable performance measures.

6. STANDARDS SPECIFIC TO TRANSITIONAL HOUSING

6.1. Purpose and Types of Transitional Housing

Transitional housing provides temporary housing and appropriate supportive services to facilitate movement to permanent housing. Transitional housing programs operate similarly to Navigation Center Emergency Shelter programs, except that longer stays are the norm. Transitional housing may also offer services geared toward a specific population, e.g., transition age youth, or provide support for longer-term changes in a person's life such as education or training.

Transitional housing programs are especially appropriate for populations in a transitional phase of life and with shared service needs such as:

- Transitional age youth;
- Persons re-entering the community following a period of incarceration;
- Veterans

Joint Transitional Housing- Rapid Rehousing (TH-RRH) programs begin with a transitional housing stay and then connect households to Rapid Rehousing subsidies and services. The requirements for the Rapid Rehousing portion of the program are the same as for other Rapid Rehousing programs. This section of the policies describes the requirements related to the transitional housing portion.

6.2. Eligibility and Prioritization

Transitional housing funded by Alameda County or by federal funding is for households who meet the HUD definition of "literal homelessness." Coordinated Entry must refer all participants to these programs. An individual or family must complete a crisis assessment, enroll in Coordinated Entry and HMIS, and be on the Crisis Queue. Priority for referral is based on the household's crisis assessment threshold score. Additional eligibility criteria may apply, depending on the program type and/or funding sources; however, they may not include requirements that violate Housing First principles such as requirements for a specified period of sobriety before entry or participation in a specific service or treatment unless that is the approved program design.

In consultation with OHCC as the Coordinated Entry Management Entity and applicable funders, Transitional Housing to Rapid Rehousing (TH-RRH) programs may choose to accept a portion of referrals from the Housing Queue rather than the Crisis Queue.

6.3. Referral Process and Enrollment

Transitional housing in Coordinated Entry: Transitional housing funded by the County or by federal resources must participate in Coordinated Entry. Housing Resource Centers

and other Coordinated Entry access points match participants to transitional housing programs in accordance with Coordinated Entry policies. All transitional housing programs must have clear admission policies. Denial of admission to transitional housing can only be based on specific permitted criteria related to eligibility, certain types of criminal records, restraining orders, violent or threatening behavior, infectious disease, or needs related to assistance with activities of daily living (ADLs). Please refer to Alameda County Emergency Shelter Standards for Year-Round Shelters.

Some types of transitional housing funded by Alameda County have dedicated referral sources/processes and are exempt from Coordinated Entry requirements. These include transitional housing programs for survivors of domestic violence, transitional housing for persons on probation (AB109) administered by the Alameda County Probation Department, and transitional housing for Veterans, in which referrals come through the VA system of care. However, regardless of whether they must accept Coordinated Entry referrals, all County-funded Transitional Housing programs except for those run by Probation or by Victim Services Providers must use the Homeless Management Information System (HMIS) to enroll and exit shelter guests and to complete status and annual assessments as appropriate. Victim Services Providers are prohibited under Federal law from entering data into HMIS and must use an HMIS-comparable database.

Some transitional housing programs in Alameda County receive all of their funding from City agencies or private organizations and are not required to accept referrals from Coordinated Entry. These programs must have clear eligibility and admissions policies so that people know how to access them and other programs know how to make referrals to them.

6.4. Minimum Standards and Required Services

6.4.1. Housing Requirements for Transitional Housing

1. All transitional housing receiving HUD Continuum of Care (CoC) funding must meet all requirements in the CoC regulations, including, but not limited to, restrictions on what residents may be required to pay (in rent or occupancy charges). If CoC funds are used for leasing or rental assistance in transitional housing, the housing must meet Housing Quality Standards (which involves an inspection at occupancy and at least annually thereafter) and rent reasonableness standards (a test for how the rent or occupancy charge compares to rents charged for similar housing in the community).
2. All participants in CoC funded transitional housing programs must enter into a lease agreement for a specified term, which may be a month-to-month term.⁸ The lease must be automatically renewable upon expiration, except upon prior notice by either party, up to a maximum term of 24 months. TH programs using month to month or short lease terms should provide clear expectations to participants about anticipated lengths of stay.

⁸ Per 24 CFR 578.51(l)

3. Transitional housing and Transitional Housing to Rapid Rehousing (TH-RRH) projects must use a low-barrier, Housing First model. Projects may not have service participation requirements other than requirements to meet periodically with someone from the program and to be working on a service/housing plan.
4. TH programs may not screen out participants based on lack of income; or exclude participants who have histories of substance use or justice involvement.

6.4.2. Service Requirements for Transitional Housing

Transitional housing programs should develop voluntary service plans with participants and provide or offer referrals to services that address each participant's ongoing needs. Service planning should begin at intake and focus on identifying and transitioning participants to the most appropriate permanent housing situation.

6.5. Program Exit

HUD CoC funded transitional housing programs can offer services for a maximum of 24 months. During this time, the household should be working on, and supported to find permanent housing that they will be able to move into and afford after they leave the program. While transitional housing programs may run this long, the average length of stay is normally shorter with participants transitioning to permanent housing as quickly as possible. Under certain circumstances, a household may remain in transitional housing for longer than 24 months if permanent housing has not been located or is in process.

Terminating a resident from transitional housing based on behavior is a last resort after exhausting all other solutions and carefully considering a participant's obstacles to stability. In extreme circumstances, California's [Transitional Housing Misconduct Law](#)⁹ authorizes operators of transitional housing programs to remove program participants from housing by applying to a court for a temporary restraining order and injunction, where certain types of misconduct have occurred and the participant has not resided on the premises for more than six (6) months. "Misconduct" in this context describes acts that substantially interfere with orderly operation of the program and involve abuse or illegal behavior as defined in the statute.

If the participant has been in transitional housing for more than six months and/or the termination of services is for causes other than those covered in the statute, the situation may require formal eviction proceedings.

6.6. Performance Measures

See Appendix C for applicable performance measures.

7. STANDARDS SPECIFIC TO HOMELESSNESS PREVENTION

Prevention programs offer financial assistance and/or non-financial services to people at high risk of losing housing to prevent homelessness. Prevention programs typically include short-term or medium-term financial assistance that covers housing related expenses and

⁹ California Civil Code §1954.11-18

services including case management and legal services. Prevention services can be similar to those offered in a Rapid Rehousing program but for households that do not meet the definition of literally homeless.

Alameda County has a number of homelessness prevention programs operated with a variety of public and private funding sources, each with their own eligibility requirements, types of assistance, and limitations on assistance.

Housing Problem Solving is a form of homelessness prevention and rapid resolution specifically for people who are either already literally homeless or on the immediate verge of homelessness and seeking assistance from the homelessness response system. HPS is incorporated in Coordinated Entry as a key step in the initial and ongoing support that a household may receive to seek immediate resolutions of their situation. Housing Problem Solving includes facilitated problem solving conversations with trained staff, and may include offers of mediation assistance of flexible funding such as funding for travel, housing depositions or contributions to another's household expenses. Applicable Housing Problem Solving standards and requirements are covered in the [Alameda County Coordinated Entry](#) and [Housing Problem Solving](#) written policies.

The following sections describe homelessness prevention programs that offer time-limited financial assistance and limited supportive services such as those funded with federal or State Emergency Solutions Grant (ESG) funding and the Community Development Block Grant (CDBG). Other resources such as private funds, eviction prevention and legal services (such as Seasons of Sharing) provide similar services but are not necessarily covered by these standards.

7.1. Purpose

The purpose of prevention services is to reduce entries into homelessness. Prevention assistance may include support to a household to retain its current housing or to move to other housing without having to become literally homeless.

7.2. Eligibility and Prioritization

Homelessness Prevention assistance is for persons who are not yet homeless but are at imminent risk of homelessness per the HUD Homeless definition (Category 2). In effort to make sure that prevention resources go to those with the highest risk of homelessness ("immediate risk"), the following individuals and families will receive priority for prevention resources:

- An individual or family who will imminently lose their primary nighttime residence, provided that:
 - they will lose their housing within 14 days of the day of application for homeless assistance;
 - they have not identified a subsequent residence; and,
 - the individual or family lacks the resources of support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing.

Many traditional prevention programs work primarily or exclusively with households that have a lease. However, national and local research in Alameda County indicate that many people who become homeless and enter the homelessness response system come from other types of housing situations. For this reason, within the category of “imminent risk,” outreach should target those households who are:

1. living doubled up with family and friends, must move within 14 days and are seeking to enter shelter;
2. living in a hotel or motel using their own resources, must leave within 14 days, and are seeking to enter shelter;
3. living in their own housing, are pending eviction for non-payment of rent, must leave within 14 days, and are seeking shelter;
4. fleeing domestic violence;
5. imminently leaving foster care or have recently left foster care and are at imminent risk of losing their current housing.

ESG Specific Requirements

7.2.1. Income Requirements

Participants receiving prevention assistance funded through the federal Emergency Solutions Grant (ESG) program must have incomes at or below 30% of the Area Median Income (AMI) at intake and re-evaluation. ESG funded prevention program operators must determine that potential participants are eligible for assistance and document income and housing status.

7.2.2. Housing Unit Requirements

In addition to the household being eligible for ESG prevention assistance, the unit assisted must also meet eligibility requirements, including rent reasonableness, Fair Market Rent caps, and habitability standards (requires an inspection).

Programs should have procedures in place to follow up on any inspections that do not pass initially to resolve the situation as possible, including working with landlords where possible to raise units to pass inspections so as not to lose potential units or slow rehousing time.

7.3. Referral Process and Enrollment

Referrals to prevention programs do not go through Coordinated Entry. However, Coordinated Entry access points should have processes in place to refer eligible households who desire this assistance to prevention programs. Many prevention programs now accept applications online and access points should assist households to locate, prepare and submit applications, if assistance is needed.

For Emergency Solution Grant (ESG) funded programs, once determined eligible, the head of household must sign an ESG Participation Agreement and complete an enrollment in HMIS. All households assisted by ESG funded prevention programs must complete a housing stability plan with the assistance of their case manager.

7.4. Minimum Standards and Required Services

1. Temporary financial assistance provided to participants on a short or medium-term basis may include security deposits, utility deposits, rental assistance payments, rent arrears, utility arrears, and rental application fees, subject to specific limitations. Program should establish and make clear relevant maximum amounts per application and maximum number of times a participant may be assisted within a given time period (such as applications per year) in accordance with funding requirements and based on available research with the goal of maximizing the benefit to the community.
2. When providing temporary financial assistance, programs should take into consideration whether the participant's housing situation is likely to be sustainable after support is received. Concern that the situation may not be sustainable in the long-term should not be a basis for refusing assistance, but may be used to recommend or require creation of a housing stability plan with goals for income increases, cost decreases and/or location of alternative housing.
3. Other (non-financial) services assist clients with housing stability and linkages to mainstream services for which they qualify. Services may include housing stability assessment, case management, legal services for tenants facing eviction, landlord mediation services, housing location and rehousing support, and referrals to code enforcement, public health or other agencies when housing conditions may be unhealthy or potentially unsafe. These services may be provided by the program or through referral to a partner program.
4. For ESG-funded programs, must re-evaluate the program participant's eligibility and the types and amounts of assistance the program participant needs not less than once every 3 months.

Community Development Block Grant Specific Requirements

The primary objective of the Community Development Block Grant (CDBG) program is the development of viable communities by the provision of decent housing and a suitable living environment and expanding economic opportunities, principally for persons of low and moderate income. Each grantee must ensure that at least 70% of its expenditures over a particular time period must be used for activities qualifying under the first of those national objectives.

This requires that each activity, except those carried out under the basic eligibility categories of Program Administration and Planning and Capacity Building, meet specific tests for either of the national objectives. Specifically, activities must:

- Benefit low- and moderate-income persons;
- Prevent or eliminate slums or blight; or
- Meet urgent community development needs

- existing conditions pose a serious and immediate threat to the health or welfare of the community and
- other financial resources are not available to meet such needs.

7.5. Program Exit

Prevention services are temporary and help participants stay in housing without long-term financial support. A successful exit is one in which the participant has received the applicable assistance and maintained or secured permanent housing that is affordable for them over the long-term.

Participants may not receive Emergency Solutions Grant (ESG) funded prevention assistance for more than 24 months within 36 months. Terminations of ESG assistance may occur if the participant does not actively participate in the housing stability plan or otherwise violates the participation agreement. Exits from ESG funded prevention programs must be entered in HMIS.

8. STANDARDS SPECIFIC TO RAPID REHOUSING

8.1. Purpose of Rapid Rehousing

Rapid Rehousing programs are time-limited programs that provide housing relocation and stabilization services and short- and/or medium-term rental assistance as necessary to help a homeless individual or family move as quickly as possible into permanent housing and achieve stability in that housing.

8.2. Eligibility and Prioritization

To be eligible for Rapid Rehousing, participants must meet the definition of literal homelessness (HUD Definition, Category 1 or 4.) For Emergency Solutions Grant (ESG) funded program the participants must have income at or below 30% of Area Median Income (AMI) at entry to the program.

Health Care Services Agency staff or Housing Resource Center staff match participants to Rapid Rehousing from the Housing Queue. Factors considered in matching people to Rapid Rehousing include the priority order on the Housing Queue, their interest in Rapid Rehousing, and their likelihood of being able to pay rent independently after the temporary subsidy ends.

Some Rapid Rehousing programs operate in tandem with other programs such as Continuum of Care funded transitional housing to Rapid Rehousing (TH-RRH) programs, which begin with a shelter or transitional housing stay and then connect households to a Rapid Rehousing (RRH) subsidy and services. In these cases, participants do not need to be “re-referred” for the RRH portion of the programs if the housing or Crisis Queue was used to match the household to the shelter or transitional housing portion, and if the program maintains clear guidelines about who receives the RRH portion. (See Transitional Housing standards for the TH portion requirements of the TH to RRH program model.)

8.3. Referral Process and Enrollment

All Emergency Solutions Grant, Continuum of Care and County-funded Rapid Rehousing programs in Alameda County must utilize Coordinated Entry for program referrals.

Most Rapid Rehousing resources are matched at a regional level by Health Care Services Agency staff in coordination with Housing Resource Centers, in some cases Housing Resource Center staff may be the lead matchers. Regional matching for Rapid Rehousing means that eligible households match to programs in the region in which they sought services.

Participants must sign a participation agreement and contribute to rent on the agreed schedule.

8.3.1. Determining Amount and Duration of Rental Assistance

8.3.1.1. Standards for Amount of Rental Assistance

Providers shall determine the type, maximum amount and duration of housing stabilization and/or relocation services for individuals and families in Rapid Rehousing. These are based on information collected during the initial evaluation, re-evaluation and ongoing case management processes. Standards for determining the share of rent and utilities costs that each program participant must pay, if any, will be based on the following guidelines:

1. The maximum amount of assistance at any time is 100% of the rent amount.
2. Households with income are expected to cover a portion of their rent not later than three months after beginning the program.
3. Providers may plan to reduce participant rental assistance on a regular anticipated schedule agreed upon by both parties at enrollment (such as quarterly) provided that the scheduled reduction can be adjusted if circumstances occur that make adherence to such a schedule likely to jeopardize the household's housing stability or risk a return to homelessness.
4. Rental assistance should not exceed what the household needs to achieve housing stability. If a household has a significant and reliable gain in income that makes their housing meet the affordability standard the program should not continue to subsidize the rent.

8.3.1.2. Standards for Duration of Assistance

Rapid Rehousing program may provide up to 24 months of rental assistance, though programs with a 12-month anticipated average are permitted.

For programs funded with Emergency Solutions Grant or Continuum of Care funds, there must be a lease between the landlord and the participant for at least one-year, after which it is renewable or changes to month to month and is terminable only for cause.

Programs must maintain their rental determination policies (the amount paid toward rent by the participant). These policies must align with HUD CPD Notice 17-11. Policies cannot require participants without income to pay rent.

Programs must make a reassessment schedule with participants. It is recommended that reassessments occur at least quarterly to determine ongoing need for assistance. Formal reassessments including updates in HMIS are required annually.

8.4. Minimum Standards and Required Services

Rapid Rehousing programs must include the provision of housing location and housing stabilization services and short- or medium-term rental assistance. Not all participants must receive all three services, but the program must be able to provide them.

1. Housing relocation and stabilization services can include financial assistance to pay for rental application fees, security deposits, last month's rent, utility deposits and utility payments, and moving costs (subject to limitations) as well as services such as housing search and placement, housing stability case management, employment and training assistance, landlord mediation, legal services, credit repair, and housing counseling. Such services should be made available to increase the likelihood of the household sustaining housing after the program is over, whether by the program directly or through referral.
2. Short-term rental assistance is assistance for up to 3 months of rent. Medium-term rental assistance is assistance for more than 3 months but not more than 24 months of rent.
 - a. The rent for the unit assisted cannot exceed the rent reasonableness standard. For programs funded by Emergency Solutions Grant (ESG), rent cannot exceed HUD's published Fair Market Rent for Alameda County.
 - b. All housing that receives rental assistance must meet Housing Quality Standards or Habitability Standards (for ESG) as applicable.
 - c. The program may only make rental assistance payments to the owner of the unit with whom the program has entered a rental assistance agreement [sometimes referred to as a Housing Assistance Payments (HAP) agreement]. The agreement must include the terms under which rental assistance will be provided, the term of agreement, and specify that the landlord/owner will provide the RRH agency with a copy of all written notices to the participant.
 - d. Each program participant receiving rental assistance must have a legally binding, written lease for the rental unit.
3. While services in Rapid Rehousing must adhere to Housing First principles and no specific services or treatment may be required, participants may be required to meet (in person or virtually) with a case manager every thirty days during the duration of the program. Programs funded with Continuum of Care or ESG must include a minimum of one monthly case management meeting or service. Services focused on increasing self-sufficiency such as employment and training and access to income are central to Rapid Rehousing and should be repeatedly offered.

4. Housing stabilization services may extend past the period when rental assistance is provided but may not continue last longer than 6 months after rental assistance stops.
5. Rental assistance may be stopped for a period and begun again if the participant has remained enrolled in the program, provide that the maximum term has not been reached.

8.5. Program Exit

Rapid Rehousing assistance is temporary and helps participants secure housing that they can remain in without long-term financial support. Participants must make progress on their housing stability plans and eventually assume full responsibility for monthly housing costs. A successful exit is one in which the participant household is in permanent housing and can afford the ongoing costs associated with their housing. An unsuccessful exit is one in which the participant exits to homelessness or has been terminated from the program due to violating the participation agreement or failure to take the steps agreed to in the housing stability plan, such as seeking work, applying for benefits, looking for housing or accepting housing that meets the participant's criteria.

8.6. Performance Measures

See Appendix C for applicable performance measures.

9. STANDARDS SPECIFIC TO PERMANENT SUPPORTIVE HOUSING (PSH) AND PSH FOR SENIORS AND VULNERABLE ADULTS (PSH+)

9.1. Purpose

Permanent Supportive Housing (PSH) is housing that has no limit on length of stay, is affordable (e.g., rent capped at 30% of income or similar guideline) and where voluntary services are available to help keep tenants with histories of homelessness and disabilities or other health vulnerabilities in housing.

PSH for Seniors and Vulnerable Adults (abbreviated as PSH+) describes housing that provides a higher level of care for people who need support with activities of daily living because of physical or cognitive impairments.

PSH and PSH+ includes the following models:

1. Scattered-site PSH with tenant-based rent subsidies (housing is located throughout the community and subsidy is provided to each participant to keep the rent affordable)
2. Site-based PSH with project-based subsidies (housing is located at one site or sites and project funding or project-based vouchers keep the rent affordable)
3. PSH units within an affordable housing development where rent is set based on income level and Area Median Income (AMI) rents (housing is located within a larger affordable housing site and project funding keeps the rent affordable)

9.2. Eligibility and Prioritization

9.2.1. Minimum Eligibility

To be eligible for PSH and PSH+, participant households must meet the HUD definition of “literal homelessness” and have at least one adult or a child with a disability (please see Definitions). Most projects require that the adult head of household have a disability.

Some PSH restricts eligibility to persons who meet the HUD definition of Chronically Homeless or to persons with specific disabilities (e.g., HIV/AIDS, Serious Mental Illness) based on the funding source. The PSH program must obtain and retain documentation of the qualifying head of household’s homeless status and the qualifying person’s disability on file, including any necessary third-party documentation as required by HUD. Additionally, to be eligible for PSH+, participants must require help with Activities of Daily Living (ADLs).

Individuals and families who have spent the longest time homeless and who have the most severe service needs within a community must receive priority for Continuum of Care-funded PSH.¹⁰ Alameda County’s Coordinated Entry housing assessment incorporates questions regarding a participant’s length of time homeless, housing barriers, and health and other care needs.

9.2.2. Prioritization and Referrals

Referrals to PSH and PSH++ go through the Coordinated Entry process. The Coordinated Entry Management Entity (OHCC) matches applicants to openings in PSH and PSH++ on a county-wide basis from the county-wide Housing Queue. The Housing Queue is a list of households experiencing homelessness who are participating in Coordinated Entry and have 1) indicated an interest in one or more types of housing resources; 2) completed a housing assessment; and 3) have received priority for housing based on their housing assessment score.

PSH Pool: The PSH Pool is the band of participants in the Housing Queue with the highest housing assessment threshold scores. OHCC matches households in the PSH Pool to PSH program openings. Factors considered in matching include the following:

- Household size and ages, length of time homeless, disabilities (including HIV+)
- Questions about health conditions and wellbeing
- Questions regarding housing history and housing barriers
- Questions regarding exposure to violence and risk of violence

PSH+ may place greater weight on health factors and acuity of health conditions.

Housing availability for certain populations also factors into matching. Currently there is more housing for certain populations, such as families with children, Veterans and

¹⁰ Per HUD Notice CPD-16-11

people living with HIV/AIDS, meaning that people in these categories may be prioritized for housing opportunities more quickly even though their scores are lower.

Households with a medical necessity for an ADA unit will get priority for these units when available.

Please refer to [Alameda County Coordinated Entry Policies](#) for more information.

9.2.3. HUD-VASH

U.S. Department of Housing and Urban Development – Veterans Affairs Supportive Housing (VASH) is a program that pairs HUD’s Housing Choice Voucher (HCV) rental assistance with VA case management and supportive services for Veterans experiencing homelessness. Matching to VASH units requires a separate process done in collaboration with the Veterans Administration.

9.3. Referral Process and Enrollment

All Continuum of Care (CoC) and County-funded PSH and PSH+ programs in Alameda County must utilize Coordinated Entry for program referrals. Other PSH programs are encouraged and supported to participate.

PSH and PSH+ units are matched to at a county wide level by OHCC staff. Referrals are made based on the adopted policies for Coordinated Entry, including the expected time frames for responses and

To allow for participant choice, policies will establish how many referrals a participant may refused before they are removed the Housing Queue. In general, participants should be allowed at least two refusals, though under certain circumstances where resources are time limited they may be permitted only one refusal.

If PSH subsidies come through a Public Housing Authority, there may be additional referral and enrollment steps required as established by the PHA. These steps should be kept as few as possible and occur quickly to avoid people experiencing homelessness losing the opportunity for the resource.

Once admitted to the program, the participant household should be enrolled in the program in HMIS, if applicable.

9.4. Minimum Standards and Required Services

9.4.1. Housing Requirements for Permanent Supportive Housing (PSH) and PSH+

1. PSH leased with Continuum of Care (CoC) funds, or for which rental assistance payments are made with CoC funds, must meet all HUD housing requirements, which generally fall into three categories:
 - a. Physical Plant: Housing Quality Standards and occupancy standards (the number of people allowed to live in a unit, based on its size)

- b. Rent and Subsidy Calculation: Rent reasonableness, Fair Market Rents (FMRs) based on location, determination of what tenant must pay toward rent (“client portion”), annual reassessment of client portion
 - c. Lease requirements: Each PSH tenant must receive a lease for an initial term. For programs funded with CoC funds, there must be a lease between the landlord and the participant for at least one-year, after which it is renewable or changes to month to month and is terminable only for cause. CoC-funded programs are also prohibited from charging program fees other than rent or occupancy fees.
 - d. Leases must conform to California law and may not contain prohibited lease terms. In general, PSH leases should be similar to standard leases for other permanent housing.
2. Notwithstanding any other requirements, PSH and PSH+ must comply with the nondiscrimination provisions of Federal civil rights laws, including, but not limited to, the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, and Titles II or III of the Americans with Disabilities Act, as applicable.¹¹ The PSH or PSH+ project may be limited to a specific population, as long as admission does not discriminate against any protected class (e.g., the housing may be limited to homeless Veterans, victims of domestic violence and their children, or chronically homeless persons and families).
 3. PSH and PSH+ projects must use a low-barrier, Housing First model. Projects may not have service participation requirements or exclude participants who have histories of substance use or criminal justice involvement.

9.4.2. Service Requirements for PSH/PSH+

While participation in services in Permanent Supportive Housing (PSH) is voluntary, tenant services are an essential part of the program and must be available on an ongoing basis. At a minimum, PSH provides housing-focused support services:

1. Housing navigation and landlord engagement support (for scattered-site PSH with tenant-based rent subsidies)
2. Individualized tenancy-sustaining support services for tenants with disabilities who face challenges to keeping housing, including understanding rights and obligations of tenancy, coaching for independent living and community integration, and otherwise addressing obstacles to housing stability. (See section below for more detail on tenancy sustaining services.) Services staff-to-tenant ratios in PSH/PSH+ average 1:25, are generally no higher than 1:30 and sometimes as low as 1:15 depending on intensity of service need.
3. PSH+ programs must also include ADL supports, and opportunities for socialization, and may also include memory care.

PSH may provide support services directly or through connections to mainstream service providers as appropriate to individual/family needs. These services may include

¹¹ See 24 CFR § 5.105(a).

representative payee/money management services, harm reduction services, health or behavioral health care with a focus on behaviors and symptoms that could impact successful tenancy/housing retention, In-Home Supportive Services (IHSS), adult day services, home health services and other holistic community-based services.

9.5. Program Exit

Permanent Supportive Housing and PSH for seniors and vulnerable adults (PSH+) are permanent housing in which residents are legal tenants with a lease. Thus, there is no specific expectation as to length of stay. Residents cannot be subject to eviction based on failure to participate in services or to make progress on a service plan, loss of income or failure to improve income, or any other requirements that are not in a standard lease.

A successful exit from PSH/PSH+ is one in which the household is moving to other stable, permanent housing. Remaining in PSH/PSH+ when this housing remains appropriate is considered successful.

PSH programs should help residents who have achieved stability in PSH and who no longer need and/or desire to live there to move into affordable housing in order to free units for others who needed them. Moving On programs, often implemented in partnership with Public Housing Authorities (PHAs), enable individuals and families who are able and want to move on from PSH to do so by providing sustainable, affordable housing options and services and resources necessary to maintain housing stability.

An unsuccessful exit from PSH/PSH+ is one in which the household leaves PSH for a non-permanent destination or returns to homelessness. Other exits may be considered as neutral, such as moving to a higher form of care such as Skilled Nursing Facility.

9.6.1 Temporary Vacancies

From time to time, PSH tenants may need to be out of their unit for a period of time to engage in treatment, or meet other needs or may spend brief periods incarcerated. Under such circumstances, Continuum of Care funded PSH must allow the tenant to retain their unit for up to 90 days. Other PSH should allow flexibility as much as possible.

9.6. Performance Measures

See Appendix C for applicable performance measures.

10. STANDARDS SPECIFIC TO DEDICATED AFFORDABLE HOUSING

10.1. Purpose

Dedicated Affordable Housing (DAH) is subsidized housing for people who are or have experienced homelessness that does not require a disability to qualify. Tenants pay 30%-50% of their adjusted gross income in rent, with the intention to make DAH as affordable as possible. DAH offers limited voluntary supportive services. The expansion of DAH as recommended in Alameda County's Centering Racial Equity in Homeless System Design report and reflected in the Home Together plan is in large part to address the massive racial disparities in people experiencing homelessness and historic and current discrimination in the housing market. DAH is a new pathway that was specifically called for by racial equity focus group participants who had been challenged in accessing the system of care

previously and attempts to provide housing resources to people with varying levels of service needs.

DAH includes the following models:

- Tenant-based housing vouchers (e.g., Housing Choice Vouchers) targeted to persons experiencing homelessness
- Project-based subsidized housing with units or projects specifically limited to persons experiencing homelessness

10.2. Eligibility and Prioritization

To be eligible for Dedicated Affordable Housing, participants must be extremely low income (at or below 30% of the Area Median Income) and meet the definition of literal homelessness. DAH does not require a disability and is intended for persons who do not need the greater level of services in PSH, or are not currently prioritized for PSH, but who are anticipated to have difficulty increasing income.

Additionally, the following populations will receive priority for DAH:

- Persons who qualify under the above criteria and are ineligible for federal-funded resources because of immigration status or criminal justice histories.
- Persons “stepping down” (Moving On) from PSH or “stepping up” from Rapid Rehousing. These kinds of transfers ensure that people are in appropriate housing and that the homelessness response system reserves the most intensive types of programs for the most vulnerable participants.

10.3. Referral Process and Enrollment

Unless otherwise specified, referrals to Dedicated Affordable Housing (DAH) come through Coordinated Entry. The Office of Homeless Care and Coordination (OHCC) matches participants to DAH from the county-wide Housing Queue, which is a list of households experiencing homelessness who are enrolled in Coordinated Entry and have 1) indicated an interest in one or more types of housing resources; 2) completed a housing assessment; and 3) been prioritized for housing based on their housing assessment score.

OHCC matches households to DAH from the Housing Queue based on a modified version of the PSH matching process, with consideration to the following factors:

1. Households meets eligibility criteria for the program or opening
2. Household meets project preferences, such as geographic targeting, as stated in MOUs and/or contracts
3. Housing Assessment information
4. Participant preferences such as location or housing type.

Please see [Alameda County Coordinated Entry Policies](#) for more information.

If Dedicated Affordable subsidies come through a Public Housing Authority there may be additional referral and enrollment steps required as established by the PHA. These steps should be kept as few as possible and occur quickly to avoid people experiencing homelessness losing the opportunity for the resource.

Once admitted, participants should be enrolled in the Homeless Management Information System (HMIS) if applicable.

10.4. Minimum Standards and Required Services

10.4.1. Housing Standards for Dedicated Affordable Housing

Unless otherwise specified. Dedicated Affordable Housing (DAH) must meet HUD- established housing requirements, which generally fall into three categories:

1. Physical Plant: Unless otherwise specified, DAH housing must meet HUD Housing Quality Standards and occupancy standards (the number of people allowed to live in a unit, based on its size)
2. Rent and Subsidy Calculation: Unless otherwise specified, rents for DAH must meet the HUD rent reasonableness standard, determination of what tenant must pay toward rent (“client portion”) based on either adjusted gross income or an approved set rental standard, and annual reassessment of client portion
3. Lease requirements: Each DAH tenant must receive a lease for an initial term, which becomes month to month after expiration of the initial term. Leases must conform to California law and may not contain prohibited lease terms.

10.4.2. Services Standards for Dedicated Affordable Housing

DAH is intended to provide light voluntary services primarily focused on housing retention and on connecting residents to services in the community. These services should include:

1. Housing navigation (e.g., for tenant-based rental assistance)
2. Landlord engagement services and tenancy education and support as needed
3. Services coordinators with caseloads of 1:50-1:60 providing housing retention support and counseling as well as linkages to mainstream services, benefits advocacy, health insurance, CalFresh, etc.
4. Connections to and support for employment and educational supports
5. In housing for families, support for children’s needs including links to childcare, Headstart, WIC, children’s health insurance, school liaisons and afterschool programs and other child related services

10.5. Program Exit

Dedicated Affordable Housing (DAH) is permanent housing in which residents are legal tenants with a lease. Thus, there is no limit on length of stay. Residents cannot be subject to eviction based on failure to participate in services or any other requirements that are not in a standard lease. If a tenant's income increases to the point they no longer are eligible for the subsidy, they may be required to leave the program or to pay a market rent.

A successful exit from DAH is one in which the household is no longer receiving a subsidy but remains in the same unit or moves to other stable permanent housing that they can afford on an ongoing basis. Remaining in DAH when this housing remains appropriate is considered successful.

An unsuccessful exit from DAH is one in which the Household leaves DAH for a non-permanent destination or returns to homelessness. Other exits may be considered as neutral, such as moving to a higher form of care or housing such as into PSH/PSH+ or to a Skilled Nursing Facility.

10.6. Performance Measures

No performance measures are currently in place at the system level for dedicated affordable housing programs. Until such time as new measures are adopted, the measures for PSH will be used for DAH. See Appendix C for applicable performance measures.

11. STANDARDS SPECIFIC TO SHALLOW RENTAL SUBSIDIES

11.1. Purpose

A shallow rental subsidy program provides a partial rent payment on behalf of an eligible tenant to reduce the household's rent burden and increase their available income. They differ from "deep" subsidies because they do not necessarily ensure that the tenant pays only 30% of their income for rent. Shallow subsidies are often set at a fixed amount or a percent of the total rent, rather than floating up or down with a tenant's income. Shallow subsidies may be time-limited or ongoing.

11.2. Eligibility and Prioritization

In order to be eligible for shallow subsidies, participants must be homeless or at-risk of homelessness and have incomes that are unlikely to increase substantially because of health issues or educational or employment barriers. Targeted households have incomes at or below 50% AMI and would otherwise be paying more than 50% of their income toward rent, putting them at risk of housing instability. Additionally, the following populations will receive priority for shallow subsidies:

- Persons who qualify as at risk of homelessness and have been homeless before.
- Persons completing a Rapid Rehousing program who
 - no longer need or qualify for the program services;
 - will continue to have a rent burden of at least 50% of income if not assisted; and
- would be at risk of returning to homelessness.

Shallow Rental Subsidy programs may have additional targeting criteria based on funding requirements or program design.

11.3. Referral Process and Enrollment

Depending on the target population and purpose of a Shallow Rental Subsidy program, the referral process may differ. Programs that target households at risk of homelessness must have clear procedures for how applicants can apply and how they are selected.

Programs that target participants in a Rapid Rehousing program may take referrals from Coordinated Entry or may have direct arrangements with one or more Rapid Rehousing programs.

In all cases, Shallow Rental Subsidies should be set up as a separate program enrollment in HMIS. Whether they are set up as Homelessness Prevention, Rapid Rehousing or as Other Permanent Housing will depend on whether the program is time-limited or indefinite and whether the people receiving assistance meet the definition of homelessness at entry.

11.4. Minimum Standards and Required Services

11.4.1. Housing Standards for Shallow Rental Subsidies

1. Physical Plant: Unless otherwise specified, housing assisted with Shallow Rental Subsidies must meet habitability or Housing Quality Standards (HQS).
2. Lease: A participant in a shallow subsidy program does not have to be a leaseholder. However, Shallow Rent Subsidy programs should work with tenants to ensure they have appropriate legal protections and to be added to a lease if possible. Shallow Rental Subsidies should not be used in situations where a lease or sublease relationship violates state or federal law.
3. Rent Calculation: The manner in which a Shallow Rental Subsidy program calculates the subsidy portion of the rent may vary depending on the program and may be set at a flat rate for all participants, a defined amount based on household size and/or unit size, a percentage of the rent or based on a person's income or a combination of these factors. The method for calculating rent should be transparent to participants and part of the program's operating guidelines. A program that uses a participant's income and typically provides a subsidy that is at or near to the participant paying only 30%-40% of their income and is not time limited is considered a "deep" subsidy and would be classified as Dedicated Affordable.

11.4.2. Services Standards for Shallow Subsidies

Shallow subsidy programs should offer basic tenancy sustaining services for those with minimal needs as well as connection to higher-touch services for those with more significant needs.

11.5. Program Exit

Depending on whether the program is time-limited or not time-limited, a program exit may occur at the end of the program period or may only occur when a participant is no longer eligible for or in need of the subsidy.

A successful exit from a shallow subsidy program is one in which the household is moving to other stable, financially sustainable permanent housing. An unsuccessful exit from a Shallow Subsidy program is one in which the Household leaves for a non-permanent destination or returns to homelessness.

11.6. Performance Measures

No performance measures are currently in place at the system level for shallow rental subsidies. Programs should keep information about retention rates and length of participation.

12. STANDARDS SPECIFIC TO TENANCY SUSTAINING SERVICES

12.1. Purpose

Tenancy Sustaining Services are services provided to homeless and formerly homeless households with the goal of maintaining safe and stable tenancy once housing is secured. Tenancy Sustaining Services are typically provided through a voluntary Medi-Cal Managed Care Plan as a reimbursable service created as part of California's CalAIM initiative. However, eligibility includes people who do not receive or are ineligible for Medi-Cal.

12.2. Eligibility and Prioritization

Tenancy Sustaining Services are for households that meet the definition of literal homelessness or are formerly homeless and authorized for Tenancy Sustaining Services.

12.3. Referral Process and Enrollment

The Health Care Services Agency will refer eligible individuals to a Tenancy Sustaining Services provider. When there are not enough tenancy sustaining service slots for all individuals who want or need them, services will be prioritized for people who are in housing referred to through Coordinated Entry, with Permanent Supportive Housing as the highest priority. When there is a specific tenancy sustaining services provider connected to site-based housing program, the referral to that housing program also serves as a referral to that provider, therefore households can be enrolled in tenancy sustaining services connected to a specific housing program without a separate referral. The Tenancy Sustaining Services provider should connect with any current Housing Navigation or other service providers to coordinate transfer of services. The provider must make reasonable attempts to conduct outreach to assigned participants within 24 hours of referral. Tenancy Sustaining Services providers must enroll participants in the Homeless Management Information System (HMIS).

12.4. Minimum Standards and Required Services

Services should be based on an individualized assessment of needs and documented in an individualized housing support plan. Providers will follow client to staff caseload ratios with an average of 25:1 and provide at least one service encounter per month. Services may include any of the following services, or any subset of the services.

1. Providing early identification and intervention for behaviors that may jeopardize housing, such as late rental payment, hoarding, substance use, and other lease violations.
2. Education and training on the role, rights, and responsibilities of the tenant and landlord.
3. Coaching on developing and maintaining key relationships with landlords/property managers with a goal of fostering successful tenancy.

4. Coordination with the landlord and case management provider to address identified issues that could impact housing stability.
5. Assistance in resolving disputes with landlords and/or neighbors to reduce risk of eviction or other adverse action including developing a repayment plan or identifying funding in situations in which the Member owes back rent or payment for damage to the unit.
6. Advocacy and linkage with community resources to prevent eviction when housing is or may potentially become jeopardized.
7. Assisting with benefits advocacy, including assistance with obtaining identification and documentation for SSI eligibility and supporting the SSI application process. Such service can be subcontracted out to retain needed specialized skillset.
8. Assistance with the annual housing recertification process.
9. Coordinating with the tenant to review, update and modify their housing support and crisis plan on a regular basis to reflect current needs and address existing or recurring housing retention barriers.
10. Continuing assistance with lease compliance, including ongoing support with activities related to household management.
11. Health and safety visits, including unit habitability inspections (not HQS).
12. Other prevention and early intervention services identified in the crisis plan that are activated when housing is jeopardized (e.g., assisting with reasonable accommodation requests that were not initially required upon move-in).
13. Providing independent living and life skills including assistance with and training on budgeting, including financial literacy and connection to community resources.

Providers must provide the documentation required for the County, including entry of service encounters and provision of housing deposit assistance in HMIS, to submit claims and comply with applicable requirements of the California Department of Health Care Services under its CalAIM Community Supports Program.

12.5. Program Exit

Tenancy Sustaining Services are available until the time when the individual's housing support plan determines they no longer need the service. Service duration can be as long as necessary. If a provider terminates services for any reason, the provider shall support transition planning into other programs and services that meet the participant's needs. Tenancy Sustaining Services are only available for a single duration in the participant's lifetime. The services can be approved one additional time with documentation as to what conditions have changed to demonstrate why providing services would be more successful on the second attempt.

12.6. Performance Measures

The CoC has not adopted performance measures for this program type, but contracts contain the following performance measures.

- Less than 10% of participants enrolled in tenancy sustaining services will exit housing to the streets, emergency shelter, unknown, or other non-permanent housing destinations.

- At least 90% of participants enrolled in tenancy sustaining services will keep their housing for one year or longer.
- At least 75% of participants will have maintained their income from program entry to their most recent annual/exit assessment, among those enrolled 12 months or longer and those exited from the program.
- At least 65% of participants will have one or more of the following non-cash benefits after 12 months in the program or at the time of their exit from the program as documented at intake, annual assessment, and/or exit: WIC, CalFresh, CalWorks childcare, and transportation benefits.

APPENDIX A: DEFINITIONS

Access Point: Access Points are the virtual or physical places or programs where an individual or family experiencing homelessness or at imminent risk of homelessness seeks and receives assistance to connect to resources from the Housing Crisis Response System that are available through Coordinated Entry.

Area Median Income (AMI): The gross median household income for a specific Metropolitan Statistical Area, county or non-metropolitan area established annually by HUD. AMI is used in many federal programs to determine eligibility and make rent calculations. (See Low, Very Low and Extremely Low Income.)

Coordinated Entry (CE or CES): The coordinated method and process by which people experiencing homelessness gain access to housing and program resources and are prioritized based on an assessment of their needs and vulnerabilities and matched to housing resources for which they are eligible. HUD requires every CoC operate a Coordinated Entry process which must at minimum allocate all CoC-funded housing resources.

Continuum of Care (CoC) (geography): Designated geographic area which receives State and federal funding including funding from the Continuum of Care program (see CoC program) and is responsible for certain required activities including HMIS, Coordinated Entry, conducting Point-in-Time counts and applying for federal funding. In California, a CoC generally covers a county or group of counties, though some cities have their own CoC.

Continuum of Care (CoC) Board: A geographically-based group of representatives that carries out the planning responsibilities of the Continuum of Care program pursuant to HUD regulations. This body usually includes services providers, local government representatives, people with lived experience and other business, civic and community representatives.

Crisis Queue: The Crisis Queue is a list of households that have indicated an interest in crisis resources including shelter, transitional housing and safe parking, and that have been assessed using the Crisis Assessment and prioritized for such resources. The Crisis Queue contains key information about the household that is used to match clients to available crisis resources.

Disabled: The head of household has a disabling health condition(s) that is expected to be of long-continued and indefinite duration and substantially impedes the persons' ability to live independently, such as a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability.

Diversions: Diversion (also sometimes call Problem Solving) is a strategy that seeks to prevent homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements, including staying with family and friends, and if necessary, connecting them with services and financial assistance to help them return to permanent housing.

Emergency Shelter: A facility with overnight sleeping accommodations, the primary purpose of which is to provide a temporary shelter for people experiencing homeless in general or for specific populations of people who are homeless, and which does not require occupants to sign leases or occupancy agreements.

Emergency Solutions Grant: A federal formula grant program that provides funds to States and certain localities to address homelessness through Outreach, Shelter, Rapid Rehousing, and Prevention.

Extremely Low Income: A household that has gross adjusted income at or below 30% of the Area Median Income.

Fair Market Rent: Fair Market Rents are estimates of 40th percentile gross rents for standard quality units within a metropolitan area or nonmetropolitan county. In many housing programs, units rented or subsidized must rent for within the applicable FMR.

Habitability Standards: Minimum standards for safety, sanitation, and privacy in emergency shelters funded with ESG, and minimum habitability standards for permanent housing funded under the Rapid Rehousing and Homelessness Prevention components of ESG. The habitability standards are different from, and less stringent than, Housing Quality Standards (HQS) used for other HUD programs.

Harm Reduction: Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with substance use. Harm reduction includes a spectrum of strategies such as safer use, managed use, abstinence, and meeting people who use drugs “where they’re at.” Harm reduction is also a movement for social justice built on a belief in, and respect for, the rights of people who use drugs.

Homeless Management Information System (HMIS): A Homeless Management Information System (HMIS) is a web-based local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. The operation of an HMIS and much of the data that is collected are federally mandated, but each community operates its own HMIS system.

Homelessness Prevention: Any of a number of programs that provide short-term financial, legal and/or support services assistance intended to prevent at-risk households from losing their housing and becoming homeless.

Homelessness Response System: The overall system of programs, housing, and services to address homelessness within a given community or region, usually within a Continuum of Care.

Homelessness Verification: Documentation that provides acceptable evidence of a participant’s homeless status. HUD has specific guidelines and preference orders for what qualifies as acceptable verification.

Housing First: The philosophy, evidence-based model and required approach in California which holds that provision of housing should not be conditioned on other things such as sobriety or service participation, and that services should be voluntary.

Housing Navigator: A person who provides a set of services designed to support homeless households to locate, obtain, and retain housing. Navigation services include, but are not limited to, developing a housing support plan, searching for housing and assisting with applications and gathering required documentation, securing resources for one-time move-in

expenses, coordinating move-in, support with connecting to other services and resources the individual needs and supporting housing retention.

Housing Quality Standards (HQS): National standards established by the U.S. Department of Housing and Urban Development to ensure that subsidized units meet minimum quality criteria for the health and safety of tenants. HQS inspections are a requirement of many federally-funded housing programs.

Housing Queue: The Housing Queue is a list of households that have indicated an interest in one or more types of housing resources and been assessed and prioritized for such resources. The Housing Queue contains key information about the household that is used to establish an order and to match clients to available and anticipated housing resources.

Housing Resource Centers: Housing Resource Centers are Access Points at physical sites located across the County offering in-person and virtual services. Housing Resource Centers must offer the full range of Coordinated Entry activities including outreach, triage, Housing Problem Solving, assessment and matching to regional resources. HRCs may be targeted to specific populations and geography but must be open to all eligible persons.

Literally Homeless: Category 1 of HUD's definition of homelessness. Literally homeless means an individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning the individual or family has a primary nighttime residence that is a public or private place not meant for human habitation, the individual or family is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including hotels and motels paid for by charitable organizations or federal, state, or local government programs), or the individual is exiting an institution where s(he) has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

Low Barrier: A descriptor of programs, projects, or system components that have few or no requirements, restrictions, or pre-conditions that prevent or slow a person experiencing homelessness from gaining or retaining access to housing, shelter, or services.

Permanent Supportive Housing (PSH): A form of subsidized housing designed for individuals with very low incomes and chronic, disabling physical and/or mental health conditions. This housing provides voluntary access to a flexible and comprehensive array of supportive services and places no limits on length of tenancy as long as the terms and conditions of the lease agreement are met.

Person with Lived Experience: A person who is experiencing or has in the past experienced homelessness or has experience with other circumstances or conditions that are frequently present in people who experience homelessness or can lead to homelessness such as poverty, mental health disabilities, incarceration, or addiction/recovery.

Point-in-Time (PIT) Count: The Point-in-Time (PIT) count is a count of sheltered and unsheltered people experiencing homelessness on a single night in January. HUD requires that Continuums of Care conduct an annual count of people experiencing homelessness who are

sheltered and a count of unsheltered people experiencing homelessness at least every other year. Each count is planned, coordinated, and carried out locally.

Rapid Rehousing (RRH): Rapid Rehousing is an intervention, informed by a Housing First approach, that 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.

Reasonable Accommodation: Adjustments to rules, policies, practices and procedures as well as physical modifications to facilities required to accommodate special needs as a result of a disability.

Rent Reasonableness: A HUD standard to ensure that rents for units covered by a subsidy program are reasonable in relation to rents being charged for comparable unassisted units in the same market.

Rental Subsidy: Financial assistance provided within a housing program that supplements rent paid by a tenant. Specific program or resource guidelines determine eligibility, length, and amount of rental subsidies that can be provided.

Scattered site: Scattered site refers to housing programs in which units are distributed throughout a community, either as individual units or small clusters, as opposed to concentrated at a single site. Scattered site is a common designation for tenant based rental assistance programs (see TBRA).

Shelter: See Emergency Shelter

Serious Mental Illness (SMI): A mental, behavioral, or emotional disorder resulting in serious functional impairment, which substantially interferes with or limits one or more major life activities.

Threshold Score: The score on a Coordinated Entry crisis or housing assessment needed to qualify the participant to be placed on the corresponding queue.

Transitional Housing (TH): An interim housing project or program that is designed to provide housing and appropriate supportive services to homeless persons to facilitate movement to independent living. The housing is time-limited, typically between six and 24 months.

Transition Age Youth (TAY): Transition Age Youth are young people between the ages of 18 and 24. Some TAY-targeted programs are specifically for youth who are in transition from state custody or foster care and may serve youth as young as 16.

Unsheltered homelessness: A person with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground.

Very Low Income (VLI): A household that has an adjusted gross income at or below 50% of the Area Median Income

Veteran's Affairs (VA): The US Department of Veterans Affairs provides patient care and federal benefits to Veterans and their dependents. Its housing programs include SSVF and HUD-VASH.

Victim Service Provider (VSP): A Victim Service Provider is a private nonprofit organization whose primary mission is to provide services to victims of domestic violence, dating violence, sexual assault, or stalking. Providers include rape crisis centers, domestic violence shelters and transitional housing programs, and other programs.

Youth: See Transition Age Youth

APPENDIX B: HUD HOMELESS DEFINITIONS

At Risk of Homelessness:

(1) An individual or family who:

(i) Has an annual income below 30 percent of median family income for the area, as determined by HUD;

(ii) Does not have sufficient resources or support networks, *e.g.*, family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the “Homeless” definition in this section; and

(iii) Meets one of the following conditions:

(A) Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance;

(B) Is living in the home of another because of economic hardship;

(C) Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days of the date of application for assistance;

(D) Lives in a hotel or motel and the cost of the hotel or motel stay is not paid

by charitable organizations or by federal, State, or local government programs for low-income individuals;

(E) Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons, or lives in a larger housing unit in which there reside more than 1.5 people per room, as defined by the U.S. Census Bureau;

(F) Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or

(G) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved consolidated plan;

(2) A child or youth who does not qualify as “homeless” under this section, but qualifies as “homeless” under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)); or

- (3) A child or youth who does not qualify as “homeless” under this section, but qualifies as “homeless” under section 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a (2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.

Acceptable evidence of at risk of homelessness status is detailed in 24 CFR 576.500(c).

Chronically homeless

(1) A “homeless individual with a disability,” as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:

- (i) Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
 - (ii) Has been homeless and living as described in paragraph (1)(i) of this definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (1)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the institutional care facility;
- (2) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or
- (3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

Acceptable evidence of chronically homeless status is detailed in 24 CFR 578.103(a)(4)

Homeless

- (1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
- (i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
 - (ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters,

transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or

- (iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

(2) An individual or family who will imminently lose their primary nighttime residence, provided that:

- (i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
- (ii) No subsequent residence has been identified; and
- (iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;

(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

- (i) Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);
- (ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
- (iii) Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and
- (iv) Can be expected to continue in such status for an extended period of time because of chronic disabilities; chronic physical health or mental health conditions; substance addiction; histories of domestic violence or childhood abuse (including neglect); the presence of a child or youth with a disability; or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or

(4) Any individual or family who:

- (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within

the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;

(ii) Has no other residence; and

(iii) Lacks the resources or support networks, *e.g.*, family, friends, and faith-based or other social networks, to obtain other permanent housing.

Acceptable evidence of homeless status is detailed in 24 CFR 576.500(b).

APPENDIX C: PERFORMANCE MEASURES FOR PROGRAM TYPES COVERED IN WRITTEN STANDARDS

The CoC's Results Based Accountability (RBA) framework includes the following performance measures:

1. Emergency Shelter

- Average length of stay for emergency shelter participants will not exceed 183 days.
- At least 75% of emergency shelter participants will maintain or increase their income.
- At least 80% of adult emergency shelter participants enrolled in mainstream benefits by annual/exit assessment.
- At least 90% of emergency shelter program participants enrolled in health insurance.
- At least 30% of emergency shelter program participants successfully move into permanent housing.

2. Transitional Housing

- The average length of participation for Transitional Housing shall not exceed 279 days.
- At least 80% of Transitional Housing program participants will maintain or increase their income.
- At least 83% of Transitional Housing program participants will enroll in mainstream benefits by annual/exit assessment.
- At least 80% of Transitional Housing program participants will be enrolled in health insurance by annual/exit assessment.
- At least 80% of Transitional Housing participants will successfully exit the program to permanent housing.
- No greater than 10% of Transitional Housing participants will exit the program to homelessness.

3. Rapid Rehousing

- At least 60% of households served in Rapid Rehousing will move into permanent housing within two months of project entry.
- At least 50% of Rapid Rehousing program participants will increase their income.
- At least 85% of Rapid Rehousing program participants will be enrolled in mainstream benefits by annual/exit assessment.
- At least 85% of Rapid Rehousing program participants enrolled in health insurance by annual/exit assessment.
- At least 80% of Rapid Rehousing participants will successfully exit the program to permanent housing.
- No greater than 5% of Rapid Rehousing participants will exit the program to homeless destinations.

4. Permanent Supportive Housing

- At least 75% of PSH program participants maintain or increase their income.
- At least 78% of PSH program participants enrolled in mainstream benefits by annual/exit assessment.
- At least 90% of PSH program participants enrolled in health insurance by annual/exit assessment.
- At least 95% of PSH participants remain housed in the program for one year or longer.
- No greater than 5% of PSH participants exit the program to homeless destinations

APPENDIX D: OTHER REFERENCED AND LOCALLY-ADOPTED POLICIES & PROCEDURES
[Alameda County Emergency Shelter Standards for Year-Round Shelters](#) (April 2022 Update)

[Alameda County Coordinated Entry Policies](#) (February 22, 2022 Update)

[Alameda County Continuum of Care Homeless Management Information System \(HMIS\) Policies and Procedures Manual](#) (December 17, 2019)

[Alameda County Housing Problem Solving Policies](#) (May 13, 2020)