



Sonoma County Continuum of Care Coordinated Entry Committee
Agenda for July 5, 2023
12:00pm-1:30pm Pacific Time

Zoom link:

<https://sonomacounty.zoom.us/j/92281657937?pwd=SW42V2tOcHdIY0o5OStQNfK3WUY4UT09>

Passcode: 710577

	Agenda Item	Packet Item	Presenter	Time
1.	Welcome, Roll Call and Introductions		Committee Chair	12:00pm
2.	Approval of agenda and minutes (Action Item)	1,2	Staff	12:05pm
3.	Updates to Rapid Re-housing and Emergency Shelter program standards (Action Item)	3,4	Staff	12:10pm
4.	Coordinated Entry quarterly performance evaluation	5	HomeFirst Staff	12:40pm
5.	Coordinated Entry self-evaluation	6	Staff/HomeFirst Staff	1:00pm
6.	Public Comment on non-agenized items		Public	1:25pm

PUBLIC COMMENT:

Public Comment may be made via email or during the live zoom meeting. To submit an emailed public comment to the CE committee email Thai.Hilton@sonoma-county.org. Please provide your name, the agenda number(s) on which you wish to speak, and your comment. These comments will be emailed to all Board members. Public comment during the meeting can be made live by joining the Zoom meeting using the above provided information. Available time for comments is determined by the Board Chair based on agenda scheduling demands and total number of speakers.

Sonoma County Continuum of Care Coordinated Entry Advisory Committee (CEA)

June 7th, 2023: 12:00pm-1:30pm.

Meeting Recording:

https://sonomacounty.zoom.us/rec/share/dIGcyf8QWQ1H4mS_B8ZWe0SnSSma8GBETnSIHVkNX5lvaQQ_-WVuRdi0vQyKbmnO.5DkGK6oWgIDDzH9Z?startTime=1686163796000

Passcode: 8+U#1nGE

- 1) Welcome, Roll Call and Introductions:** Graham Thomas proxy for Committee Chair Matthew Verscheure called Meeting to order at 12:02pm; Alea Tantarelli, went over Zoom rules around public comment and Brown Act guidelines.

Roll Call:

Present: Mary Haynes, Margaret Sluyk, Ben Leroi, Graham Thomas (proxy for Mathew Verscheure), Justin Milligan, Kathleen Pozzi, Thomas Phillips, Sasha Cohen, Garret Crane (proxy for Mildred Williams), Sara Hunt, Heather Jackson

Absent: Ashlyn Artis, Robin Phoenix, Susan Pierce, Wendell Coleman

- 2) Approval of agenda/minutes/follow up item (Action item):** Approval of minutes from 5.3.23 CEA meeting, Approval of agenda for 6.7.23 meeting, approval of follow-up staff report from 5.3.23.

Motion: Thomas Phillips moved to approve 5.3.23 meeting minutes and 6.7.23 agenda; Sasha Cohen seconds.

Public comment: None

Vote:

Ayes: Mary Haynes, Margaret Sluyk, Ben Leroi, Graham Thomas, Justin Milligan, Kathleen Pozzi, Thomas Phillips, Sasha Cohen, Garret Crane, Sara Hunt, Heather Jackson

Nays:

Abstain:

Motion passes

- 3) Coordinated Entry self-assessment:** Hunter Scott went over agenda item and shared information; The Sonoma County Coordinated Entry (CE) policies and procedures state that the Coordinated Entry Advisory Committee (CEA) will complete HUD's CE self-assessment annually. This self-assessment is sometimes required for funding applications. There are seven sections to the self-assessment. Lead-agency and HomeFirst staff will guide the committee through the assessment process during CEA Meetings and can schedule additional meeting if needed.

Public comment: None

- 4) **Continuum of Care expansion grant for Coordinated Entry:** Hunter Scott shared screen and presented information on expansion grant to the current Coordinated Entry Grant. That proposal was awarded 200,002 in annual renewable funds. Presentation covered summary of HomeFirst's plans for this CE expansion.

Public Comment: None

- 5) **Coordinated Entry assessment and prioritization redesign working group proposal (Action Item):** Hunter Scott, Homefirst along with TA, HomeBase Karen Kowal, Jean Waldine Field and ICF, Mayte Antelo provided overview on technical assistance (TA) offered by the state on the redesign of assessment and prioritization processes in Sonoma County. As well as overview on proposal for CE Assessment/Prioritization redesign working group.

Public comment: None

Vote:

Ayes: Mary Haynes, Margaret Sluyk, Graham Thomas, Justin Milligan, Kathleen Pozzi, Thomas Phillips, Sasha Cohen, Garret Crane, Sara Hunt, Heather Jackson

Nays:

Abstain:

Motion passes

- 6) **Public Comment on non-agenized items:** None

Meeting adjourned at 1:19pm



Sonoma County Continuum of Care Coordinated Entry Advisory Committee Executive Summary

Item: 3. Updates to Emergency Shelter (ES) and Rapid Re-housing (RRH) standards

Date: July 5, 2023

Staff Contact: Thai Hilton thai.hilton@sonoma-county.org

Agenda Item Overview

In 2022, the California Department of Housing and Community Development (HCD) monitored the lead agency for compliance with ESG-CV regulations. This monitoring generated 7 findings and 3 concerns. Findings result in required corrective action. Concerns result in recommended corrective action. Most of these findings pertained to the local written standards for ES and RRH programs and were largely related to record-keeping requirements. The lead agency updated the ES and RRH standards and sent them to HCD for approval. They were approved by HCD. The lead agency then held a required training on the changes to the standards. All providers who received ESG-CV funds attended the training or watched a recording of the training. The lead agency has been cleared from these findings and concerns however, these standards need to be approved by the CEA committee and CoC board before they can be sent to providers. Below are details on the findings. Staff will provide a summary of the findings and concerns and the changes in the meeting.

Updates to ES standards: HCD found that some ES providers were conditioning shelter stays on participation in case management. Also, HCD found that ES providers were not properly documenting homelessness status at intake. The lead agency created a new policy that states that ES providers cannot condition shelter stays on participation in case management. The lead agency also updated the intake policy to reflect the record-keeping requirements.

- Prohibition of conditioning shelter stays on participation in case management: Pg. 6 of ES standards.
- Documenting homelessness status at intake: Pg. 9 of ES standards.

Updates to RRH standards: HCD found that some RRH providers were not conducting reevaluations in compliance with ESG-CV regulations. They also found that some RRH providers were not documenting eligibility of program participants properly and that they were not documenting services and payments made on behalf of program participants in compliance with ESG-CV regulations. They also found that the local RRH standards lacked information on how to comply with these regulations. They found that some RRH files lacked proper lease-up documents or that the lease-up documents lacked required Violence Against Women Act (VAWA) protections. They found that the local RRH standards lacked the information needed to comply with VAWA regulations. They found that the standards lacked information on how to comply with lead-based paint regulations. Finally, HCD found that the standards lacked regulations that relate to documenting disposition and use of equipment bought with ESG-CV funds. The location of the policy changes/additions can be found on the pages below.



- Reevaluations: Pg. 9
- VAWA protections: pgs. 17-20
- Program income: Pg. 20
- Recordkeeping
 - Intake and eligibility: pg. 22
 - Lease-up documents: pgs. 23-24
 - Lead-based paint requirements: pg. 24
 - Services provided and payments made of behalf of program participants: pg. 24
 - Equipment: pgs. 24-26

Recommendation

Approve the changes to the ES and RRH standards.

SONOMA COUNTY CONTINUUM OF CARE
EMERGENCY SHELTER STANDARDS OF CARE

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Rationale:

The CoC Program Interim Rule requires CoCs to establish and follow written standards for providing CoC assistance in consultation with recipients of the Emergency Solutions Grants (ESG) program (24 CFR 578.7(9)). The ESG Program Interim Rule requires the ESG recipient to establish and consistently follow written standards for providing assistance with ESG funds (24 CFR 576.400 (e)). At a minimum, these written standards must include:

- Policies and procedures for evaluating individuals' and families' eligibility for assistance in the CoC and ESG Program;
- Policies and procedures for determining and prioritizing which eligible individuals and families will receive assistance for Street Outreach, Emergency Shelter, Homelessness Prevention (HP), Permanent Supportive Housing (PSH), Transitional Housing (TH), and Rapid Re- Housing (RRH);
- Standards for determining what percentage of rent a program participant must contribute while enrolled in a RRH or HP project.

The County of Sonoma Continuum of Care has adopted the following Standards of Care for Emergency Shelters. Emergency shelters are safety net facilities for people experiencing housing crisis. They provide an entry point into stabilization services leading as quickly as possible to permanent housing. Because participants are in crisis, entry requirements and documentation are minimal and regardless of ability to pay. Programs involve congregate living; therefore, basic community rules ensure a safe and healthy environment in which participants can progress in resolving their housing crisis.

Program Standards serve as a common policy framework and the minimum standards for Sonoma County's Emergency Shelters. All projects funded under the CoC program, Emergency Solutions Grant (ESG) Program, shall apply the following standards consistently for the benefit of all program participants. The CoC strongly encourages projects that do not receive the above-mentioned funds to accept and utilize these standards. These policies have been developed through a working consensus process. While the Emergency Shelter Program standards are not policies and procedures, they may be used as an outline for local agency policies, procedures, and adopted policies should be incorporated into local manuals.

GUIDING PRINCIPLES/PROGRAM ELEMENTS

HOUSING FIRST

On September 29, 2016, Governor Jerry Brown signed Senate Bill 1380, making California a Housing First state. This requirement applies to any program providing housing or housing-based services to people experiencing homelessness or at risk of experiencing homelessness, whether the program was designed to address homeless or not.

The Housing First model is an approach to serving people experiencing homelessness that recognizes a homeless person must first be able to access a decent, safe place to live, that does not limit length of stay (permanent housing), before stabilizing, improving health, reducing harmful behaviors, or increasing income.

Under the Housing First approach, anyone experiencing homelessness should be connected to a permanent home as quickly as possible, and programs should remove barriers to accessing the housing, like requirements for sobriety or absence of criminal history. It is based on the “hierarchy of need:” people must access basic necessities—like a safe place to live and food to eat—before being able to achieve quality of life or pursue personal goals.

PROGRAM ELEMENTS

STABILIZATION AND BASIC ORIENTATION TO PROGRAM:

Shelters should ensure personal contact is made to acclimate new participants to the facility and help them establish a sense of safety. A one-to-one meeting should take place within the first week to build rapport and offer support in resolving housing crises.

HOUSING FOCUSED:

Emergency shelter programs should direct their services to resolving the individual’s housing crisis. For all permanent shelters participants should be enrolled in Coordinated Entry within 3 days of entering a shelter program. For winter or temporary shelters, shelters will refer participants to a CE access site within 3 days of entering the shelter program. Shelters will offer non-mandatory case management services to clients. Case management is always voluntary and not a requirement of the shelter. A Housing First model case management should create a dialog focused on addressing barriers to housing. Individual activities should be compiled in an Individual Action Plan or equivalent, with review with the case manager. Seasonal shelters generally do not provide case management services due to their operating hours. If able, seasonal shelters will refer clients to CES or other community services.

SERVICES:

With the understanding that each participant's needs are individual, as a system of care the CoC seeks to make the following services available to all shelter participants. These services may be provided by the shelter or the shelter may refer clients to these services if/when they are available. These services are not mandated parts of the shelter program and the acceptance of these services or referrals is up to the client. Program participants must not be required to receive treatment or perform any other prerequisite activities (such as engaging in a housing plan) as a condition for receiving shelter.

- i. Health Assessment, establishment of primary care home and health coverage, and access to behavioral health treatment as needed.
- ii. Financial education, Money Management & Savings Programs, including tenancy education and credit clean-up.
- iii. SSI/SSDI Outreach, Access, and Recovery (SOAR) benefits assistance; a program designed to increase access to Social Security Administration (SSA) disability benefits for eligible individuals who are experiencing or at risk of homelessness and have a mental illness, medical impairment, and/or a co-occurring substance use disorder.
- iv. Legal services: record expungement, addressing pending charges, and legal services for those fleeing domestic violence.
- v. Other Mainstream resources: i.e. MediCal, Temporary Assistance for Needy Families, Cal Fresh, substance abuse services.

TRAUMA INFORMED CARE

Sonoma County shelters seek to provide a trauma-informed system of care. All shelters should work to bring *Seeking Safety* evidence-based practice into their programs. Trauma-informed services should include case management; onsite integrated health resources; ACEs-based programs; living skills programs focused on communication skills, grief/loss, and well-being.

Shelter operations:

ELIGIBILITY

TARGET GROUPS: This document establishes minimum standards for shelters serving single adults, families with children, Transitional Aged Youth, and other specialized populations. *Individual shelters may establish standards for more specialized practice.*

All shelters receiving ESG or CoC funds must serve only clients who meet federal definitions of homelessness (and in limited cases, those “at-risk” of homelessness). Homeless status is verified at intake for all incoming shelter residents.

https://files.hudexchange.info/resources/documents/HomelessDefinition_RecordkeepingRequirementsandCriteria.pdf

- a. **Documentation:** Please see the chart on page 16-17 for acceptable forms of documentation. Shelters should make every effort to meet federal standards of documentation. The preference is for 3rd party documentation. 2nd party documentation (observation by a homeless services provider) is acceptable if 3rd party documentation is not available. At a minimum, client self- certification will be accepted. Lack of 3rd party documentation must not prevent an individual or family from being immediately admitted to emergency shelter. Records contained in an HMIS or comparable database used by victim service or legal service providers are acceptable evidence of 3rd party documentation and intake worker observations.
- b. **Income Levels:** *There is no fee for using emergency shelter services.* However, all shelter participants will be required to certify their income level.

ADMISSIONS

POLICIES AND PROCEDURES:

Shelters are required to create policies and procedures for accepting individuals into their shelter programs for those clients not covered in the Unified Shelter Intake Policy below.

SHELTER INTAKE

Shelters must provide access to all individuals who wish to access shelter and they must provide accommodations to those who may not otherwise be able to access shelter. See the Reasonable Accommodation policy. Providers must actively seek to engage and offer shelter services to those who normally are unable to access shelter services.

Shelter providers will conduct intakes for 75% of their beds on a first come-first served basis. If beds are not available, the shelter will develop a waitlist and contact the client when their name has been reached.

Shelter providers will maintain a minimum of 25% of their beds for vulnerable individuals who may be referred from outreach teams and emergency service providers including community mental health response teams. Shelters will keep a mixture of top and bottom beds available for this set aside. These beds are to be filled on a first come, first served basis.

When an individual expresses interest in shelter, outreach workers or other service providers, will determine which shelter best meets an individual's needs based that client's needs and preferences. When a shelter option is determined, the shelter will be contacted to check the availability of their set aside beds by calling a designated phone number for the shelter. If a bed is available, the outreach worker will assist the individual in getting to the shelter. If no immediate shelter placements are available, the outreach worker will offer assistance connecting the client to the agency's first come, first serve waitlist and provide the client with information on other options for emergency shelter/services referrals.

Individuals accepted into these set aside beds will be expected to arrive at the shelter during the agencies intake hours of operation as directed by the shelter. If an individual is unable to arrive during the agency's hours of operation, the outreach/emergency services worker will make another inquiry the following day.

Shelter providers will develop affirmative marketing strategies for bringing individuals into the shelter who would not normally choose to be served in a shelter. Shelter providers must have policies and procedures in place to make accommodations to the shelter environment to allow those individuals to access the shelter's services.

REQUIRED INTAKE DOCUMENTS:

The following documents may be required of individuals who are seeking access to emergency shelters however, documents should not constitute a barrier to accessing emergency shelter services. If the participant is unable to produce any of the following documents, the shelter may make a local decision about the necessity of pursuing them.

- a. Personal identification: at least one photo ID is preferred, see attached list for options, page 17-18.
- b. Income self-declaration
- c. HMIS intake forms
- d. Signed acknowledgment of receiving program rules or requirements.
- e. Signed acknowledgement of receiving any other participant rights and responsibility

- f. Signed acknowledgement of receiving an agency grievance procedure. All clients will be provided a copy of the procedure.

DOCUMENTATION OF HOMELESSNESS OR AT-RISK STATUS PER FEDERAL GUIDELINES.

Emergency shelters must document homeless status through written certification by the individual or head of household as the primary method of establishing homeless eligibility. For shelters where program participants may stay only one night and must leave in the morning, documentation must be obtained each night. At a minimum, the emergency shelter program should use a sign-in sheet for participants entering the shelter, certifying they are experiencing homelessness. If program participants may stay more than one night, then documentation must be obtained only on the first night the household stays in the shelter.

FAMILY SHELTERS

For purposes of admission into a shelter that serves households with children only a family is defined as;

- A head of household with minor child(ren); and
- Any household made up of two or more adults, regardless of sexual orientation, marital status, or gender identity, presenting with minor child(ren)

EXCLUSIONS:

HOUSEHOLDS WITH CHILDREN:

No one under the age of 18 should be allowed to reside in a single-adult shelter. If a household with minors presents for service at a single-adult shelter, shelter staff with refer the family to more appropriate services.

UNACCOMPANIED MINORS:

Unaccompanied minors may only be served with agreement of the legal guardian or appropriate authorities. Basic Center Programs (BCP) projects serving youth who run away from a foster care, child welfare must create a MOU between their programs and child welfare agencies that clarifies roles, responsibilities, and define the provision of services at the time youth enter the shelter. This MOU should also clarify what financial obligations are associated with the provision of services. This requirement is in accordance with ACT Information Memorandum ACYF-CB/FYSB-IM-14-1 issued on November 4, 2014

available at

https://www.rhyttac.net/index.php?option=com_content&view=article&id=160:foster-care-youth-in-rhy-programs---information-memorandum&catid=26:rhy-news&Itemid=211 BCPs should contact the parents, legal guardians, or other relatives of

each youth as soon as feasible, but no later than 71 hours of the youth entering the program

MENTAL HEALTH CRISIS:

If the participant is unstable but not actively violent, they should be immediately referred to Crisis Stabilization Unit (707-576-8181) If safety of self or others is at stake (suicidal, imminent danger to oneself or others), an immediate call should be made to 911.

READMISSION:

People who have been suspended or otherwise exited for egregious behavior may require the approval of the program manager to be readmitted. Agencies will develop their own policies and procedures for determining readmission for individuals who were exited for egregious or dangerous behavior. These policies and procedures will provide individuals an opportunity to appeal these decisions.

It is recognized that each shelter is different. Each situation, the environment it occurs in and antecedent conditions can have an impact on the perceived severity of an action. Shelters are to consider the following definitions when considering granting re-admission to a person that has previously been suspended from services. Egregious behavior is defined as abuse, abandonment, neglect, or any other conduct that is deplorable, flagrant, or outrageous by a normal standard of conduct. Dangerous behavior is defined as the creation of an imminent and unreasonable risk of injury or harm to either persons or property of another or the actor.

SEX OFFENDERS:

Shelter providers will establish policies regarding the admission of sex offenders into their respective shelters considering all funding and local restrictions that may be in place.

MEDICALLY VULNERABLE CLIENTS:

Shelters always seek to screen participants in to their shelter programs. Shelters will make every attempt to serve all who are seeking service however, when a participant's level of care exceeds what can be offered by program staff, or a participant is not able to meet their

activities of daily living (ADLs), the client may not be able to access shelter. Agencies will develop their own policies and procedures on how to accommodate medically vulnerable clients or otherwise refer to more appropriate services to help resolve their homelessness.

COORDINATION WITH OTHER PROVIDERS

COORDINATED ENTRY SYSTEM (CES)

Emergency Shelters are considered emergency services and as such must provide access to their shelters and Coordinated Entry without any barriers. This means that all permanent shelters in Sonoma County must operate as Coordinated Entry access points or must provide access to the CES system. Access is defined as providing a pathway to the Coordinated Entry System through direct enrollment and placement or through referral to another CES access point. Individuals who access shelters, must be able to enroll eligible participants directly and into HMIS and the shelter project within 3 business days or make a referral to an access point within the same period of time. If an individual seeking shelter placement should be served by another shelter (e.g. if a youth is attempting to access a family shelter), the access point must immediately refer the individual to a more appropriate shelter. In addition, shelters which operate as CES access points, must also provide a safety assessment to clients who may be fleeing domestic violence, sexual assault, stalking etc. This assessment is not intended to be comprehensive rather to determine if the person is experiencing a domestic violence, stalking, human trafficking situation and to refer that individual, if applicable, to a provider or service that may better serve them. To the extent possible, a shelter representative should attempt to attend the weekly CES case conferences.

STREET OUTREACH

Outreach workers will refer unsheltered persons to into Coordinated Entry as quickly as possible, conducting the VI-SPDAT screening as possible and assisting them to access Coordinated Entry. If clients are interested in emergency shelter, outreach workers will refer clients to shelters and explain shelters' intake process

RAPID RE-HOUSING (RRH) PROVIDERS

Emergency Shelter providers will connect clients with CES so that they can access RRH programs.

PERMANENT SUPPORTIVE HOUSING PROVIDERS:

Shelter providers will work with Coordinated Entry and PSH providers to locate clients and to assist in documentation of chronic homelessness. Additionally, PSH providers will coordinate shelter placement if a person loses PSH assistance. However, prior to exiting a

client from a PSH program, providers should coordinate with CES to see if they can facilitate a transfer to another PSH program that would better serve the client.

PARTICIPANT'S RIGHTS AND RESPONSIBILITIES

Shelter operators will develop their own participant rights and responsibilities and provide them to shelter participants upon entry. Additionally, these rights and responsibilities will be posted in common areas of the shelter. These rights will all contain the following:

- The right to be treated with dignity and respect
- The right to privacy within the constraints of a shelter environment.
- The right to reasonable accommodations
- The right to self-determination in participation in case management and services including the right to decline to participate in supportive services.
- The right to confidentiality and to be informed how that information will be used.
- The right to reside in a safe environment that is free from physical and emotional abuse.

The Client responsibilities will be developed by shelter operators but will contain the following:

- Participants are expected to maintain the confidentiality of other shelter participants.
- Participants are expected to follow the guidelines outlined by shelter operators.
- Participants are expected to respect others' right to quiet enjoyment of the premises (to the extent that this is possible in a communal environment), safety, and to help maintain a clean and safe environment.
- Participants are expected to respect the property rights of others.

EXITS FROM SHELTER

TIME LIMITS:

Shelters provide a safe temporary housing for individuals experiencing homelessness for up to 180 days within 1 shelter stay. Shelter operators will track the number of days a participant has accessed the shelter to ensure participants are not exceeding 180 days in one stay.

Extensions beyond 180 days are possible under limited circumstances. Shelters will develop their own policies and procedures for considering extensions.

EMERGENCY EXITS:

Peaceful enjoyment of the premises: Shelter environments are communal living environments that often strain the ability to maintain a peaceful or quiet environment. To

the extent that is possible in a communal shelter, participants will respect others right to the peaceful enjoyment of the premises. Violations of quiet enjoyment of the premises include derogatory language, loud outbursts, use of personal electronic devices to a level that disturbs others and any other action that disrupts others' quiet enjoyment of the premises. These may be treated with verbal or written warnings and support for behavioral change initially but can result in exit from the shelter.

Violations of safety: Shelter participants are expected to maintain a safe physical environment. This includes refraining from bringing dangerous objects/drugs into the shelter environment as well as keeping and using personal belongings or shelter property in a safe manner. Shelter providers can develop policies and procedures for the safe storage of items that may be considered dangerous and are not otherwise permitted in a shelter environment. Violations of safety also includes a failure to maintain a safe environment through neglect of personal health and hygiene, proper use or storage of personal medications or hoarding of belongings to the point that it substantially impacts the safety of other participants and staff. If a participant is unable to maintain the safety of themselves or other, either through dangerous activities or through neglect, participants may be exited from the shelter and a suspension of further services may be imposed depending on the severity of the safety violation. Providers will work with the client to identify any safety related concerns and attempt to resolve the issue, when possible, prior to any decisions pertaining to exit of the participant.

Violence: Verbal and physical violence, including threats of violence, is considered to be an egregious violation of safety. If a participant is engaged in threats or acts of violence, they can be subject to exit and a further suspension of services may be imposed. However, shelter staff are expected to consider any antecedent conditions that may have caused the threats or acts of violence and keep these in mind when imposing a suspension of services.

If an exit is required to ensure safety, the client will be informed of the reason and duration of the exit. Additionally, every effort will be made to connect the participant with more appropriate resources, and to identify a way to ensure the participant's safe transport to alternate services (e.g., detox). Whenever possible, shelter staff will elevate the case to a higher level of care, including case conferences with the Coordinated Entry.

INELIGIBLE CLIENTS:

Clients must meet the eligibility requirements to receive assistance. Clients must meet categories 1,2,3 & 4 of HUD's homeless definitions. Additionally, clients must be able to meet their own activities of daily living. Homeless definitions can be found here: https://files.hudexchange.info/resources/documents/HomelessDefinition_Recordkeeping_RequirementsandCriteria.pdf

MEDICATION STORAGE

Shelter providers will establish policies regarding the storage of participants' medication. The policy will address the storage and refrigeration of medication. Shelters will provide locked storage of medications for clients. The shelter provider will not administer or dispense medication. Shelter participants are expected to manage their medications without any assistance from staff. If a participant abuses their medication to the point of endangering themselves or others, they may be exited from the shelter.

GRIEVANCE PROCEDURE

Shelter operators will develop their own policies and procedures for participant grievances. Grievances include: appeals of decisions that impact shelter participants (exits, extensions etc.) and grievances of shelter policies or perceived unfair/unequitable treatment by agency staff. Participants should inform clients about their grievance policy upon intake or orientation. Copies of the grievance policy should be posted in the shelter and staff will make grievance forms available to clients upon request. Clients should be informed of how their grievance will be handled and will be given a timeframe for completion of each step of the process.

REASONABLE ACCOMMODATIONS

The Sonoma County Continuum of Care is committed to providing equal opportunity and reasonable accommodations to participants with disabilities to allow them to better access shelter services. Shelter operators must develop their own reasonable accommodation policies and this policy will be clearly communicated to shelter participants upon entry.

A reasonable accommodation is a change, exception or adjustment to a program, service, building or dwelling unit that will allow a qualified person with a disability to

- Participate fully in a program;
- Take advantage of a service;
- Live in a dwelling

To show that a requested accommodation may be necessary, there must be an identifiable relationship, or nexus, between the requested accommodation and the individual's disability. When a client requires an accessible feature(s), policy modification, or other reasonable accommodation, the program must provide the requested accommodation unless doing so would result in a fundamental alteration in the nature of the program or an undue financial and administrative burden. A fundamental alteration is a modification that is so significant that it alters the essential nature of the program. In such a case, if possible, the program will offer an alternative solution that would not result in fundamental alteration of the program or a financial or administrative burden.

SERVICE ANIMALS

Shelter providers will develop policies and procedures regarding access for individuals with service animals. Shelter providers must admit participants and their service animals regardless of documentation. Shelter providers must not ask what disability necessitates the service animal.

CLIENT FEEDBACK

Shelter providers must develop policies for soliciting and receiving feedback from shelter participants. Feedback can be elicited through exit interviews, surveys, focus groups etc. Shelters will utilize this feedback to assess program performance and inform shelter policies.

LIMITS TO SERVICE (TIME LIMITS) AND EXTENSIONS

Emergency shelter stays are limited to 180 days in a one shelter stay unless an extension is granted by the shelter operator. Extensions are granted on a case by case basis. Shelter operators will develop their own policies and procedures for considering extensions.

There is no limit to the maximum number of times a person can access shelter services with the exception of those whose services have been suspended due to an egregious violation of the rules.

SEASONAL SHELTERS

Seasonal shelters are designed to address the public health risk of cold or wet winter weather to unsheltered people. Shelter operators will input client data into the Homeless Management Information System (HMIS), following all relevant data quality standards, and will refer all participants to appropriate City, County, State, and other local services if able. Seasonal shelters do not offer the same supportive services to individuals that may be found in other shelters. Additionally, seasonal shelters may or may not be able to offer other amenities such as storage and food service depending on their facility and funding.

EMERGENCY PREPAREDNESS/NATURAL DISASTERS

Shelter operators must develop policies and procedures for emergency situations with relation to staff and participant safety and security. These policies and procedures should include plans for the safe evacuation of a shelter participants and staff to alternative locations in the case of a natural disaster. Staff should be trained and well versed on these policies and procedures.

COMMUNICABLE DISEASES

Shelter providers will develop policies and procedures for providing services in an environment of communicable diseases, including policies and procedures for social distancing and screening. Policies will comply with any federal, state and local public health measures. These policies and procedures should be flexible and regularly updated to comply with changing conditions and public health orders.

FACILITY STANDARDS

All Shelters will comply with the ESG Minimum Habitability Standards for Emergency Shelters and Permanent Housing found in 24 CFR § 576.403- Shelter and housing standards. <https://files.hudexchange.info/resources/documents/ESG-Emergency-Shelter-and-Permanent-Housing-Standards.pdf>

SERVING UNDOCUMENTED INDIVIDUALS IN HOMELESS SERVICE PROGRAMS

I. PRWORA Restrictions and Exceptions

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (“PRWORA”) restricted undocumented individuals from accessing a number of public benefits, including housing and homeless services. However, the PRWORA also created exceptions that allow access, regardless of the recipients’ immigration status, to programs and services that:

- i. deliver in-kind services at the community level;
- ii. do not condition the provision of assistance on the program participants’ income or resources; and
- iii. are necessary for the protection of life or safety.¹

II. Guidance from the U.S. Attorney General and HUD

The U.S. Department of Justice (DOJ) interpreted the above three-prong test to mean that all individuals, regardless of immigration status, should be given access to:

- “Short-term shelter or housing assistance for the homeless, for victims of domestic violence, or for runaway, abused or abandoned children,” and

¹ 8 U.S.C.A. § 1611(b)(1)(D).

- “Programs, services, or assistance to help individuals during periods of heat, cold, or other adverse weather conditions.”²

To date, U.S. Department of Housing and Urban Development (HUD) has not issued any similar guidance clarifying which of its homeless assistance programs are subject to PRWORA’s noncitizen eligibility restrictions.³ However, in 2016, HUD, DOJ and the U.S. Department of Health and Human Services (HHS) issued guidance specifying that the following programs and services shall remain accessible to all eligible individuals, regardless of immigration status:

- Transitional Housing (for up to two years, where the recipients or sub-recipients of government funds own or lease the housing)⁴
- Street Outreach Services
- Emergency Shelters
- Safe Havens
- Rapid Re-housing⁵

III. Exceptions to Verification Requirements for “Nonprofit Charitable Organizations”

While the PRWORA generally requires government agencies to verify the immigration status of applicants for public benefit programs, “nonprofit charitable organizations” are *not* required to verify the immigration status of applicants for federal, state or local public benefits, including for Permanent Supportive Housing programs.⁶

² U.S. Dept. Justice, Final Specification of Community Programs Necessary for Protection of Life or Safety Under Welfare Reform Legislation, 66 Fed. Reg. 3613-02 (January 16, 2001).

³ Congressional Research Service, Noncitizen Eligibility for Federal Housing Programs (updated Nov. 20, 2022) (“CRS Report”), at pp. 13-14.

⁴ HUD notes that Transitional Housing must be provided to all persons regardless of immigration status when recipients or sub-recipients of government funding own or lease the buildings used to provide the transitional housing. However, the PRWORA restricts access based on immigration status to transitional housing in which the recipients or sub-recipients of government funds provide rental assistance payments to program participants based on the participants’ income. See U.S. Dept. Hous. & Urban Dev., The Personal Responsibility and Work Opportunity Act of 1996 and HUD’s Homeless Assistance Programs (Aug. 16, 2016) (“HUD Fact Sheet”)

⁵ See HUD Fact Sheet; U.S. Dept. Hous. & Urban Dev., U.S. Dept. Health & Human Serv., U.S. Dept. Justice, interpretive letter (Aug. 5, 2016) (“Joint Letter”), at pp. 2-3.

⁶ 8 U.S.C.A. § 1642. A nonprofit charitable organization that chooses not to verify an applicant’s immigration status cannot be penalized (e.g., through cancellation of its grant or denial of reimbursement for benefit expenditures) for providing federal public benefits to an individual who is not a U.S. citizen, U.S. noncitizen national or qualified alien, except when it does so either in violation of independent program verification requirements or in the face of a verification determination made by a non-exempt entity. However, if a nonprofit charitable organization chooses to verify, even though

IV. Other Applicable Restrictions

Notwithstanding the PRWORA's immigration-related restrictions, organizations or agencies that receive federal funding must not discriminate against individuals on the basis of race, national origin or any basis protected under the following:

- Title VI of the Civil Rights Act of 1964
- Fair Housing Act
- Violence Against Women Act
- Family Violence Prevention and Services Act
- Section 109 of Title I of the Housing and Community Development Act of 1974
- Any other applicable nondiscrimination law⁷

In addition, HUD, HHS and DOJ have advised that:

*“Denying an individual a public benefit or treating an individual differently because of that individual's race or national origin would violate one or more of these statutes. For example, a recipient of federal financial assistance may not deny benefits to applicants because they have ethnic surnames or origins outside the United States. Nor may the recipient single out individuals who look or sound "foreign" for closer scrutiny or require them to provide additional documentation of citizenship or immigration status. Also, because individuals might come from families with mixed immigration status, there may be some family members who are eligible for all benefits and others who are not eligible or who can receive only a more limited subset of those benefits. Therefore, benefits providers must ensure that they do not engage in practices that deter eligible family members from accessing benefits based on their national origin”.*⁸

Useful links:

- Full text of the PRWORA: <https://www.congress.gov/104/plaws/publ193/PLAW-104publ193.pdf>
- Joint Letter: <https://files.hudexchange.info/resources/documents/HUD-HHS-DOJ-Letter-Regarding-Immigrant-Access-to-Housing-and-Services.pdf>

it is not required to do so under the PRWORA, it must comply with the procedures set forth by the Attorney General pursuant to the DOJ Interim Guidance and provide benefits only to verified to U.S. citizens, U.S. non-citizen nationals or qualified aliens. U.S. Dept. Justice, Interim Guidance on Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, 62 Fed. Reg. 61344-02 (Nov. 17, 1997) (“DOJ Interim Guidance”).

⁷ Joint Letter, at p. 4.

⁸ *Ibid.*

- HUD Fact Sheet: <https://files.hudexchange.info/resources/documents/PRWORA-Fact-Sheet.pdf>
- DOJ Interim Guidance: <https://www.govinfo.gov/content/pkg/FR-1997-11-17/pdf/97-29851.pdf>
- CRS Report: <https://crsreports.congress.gov/product/pdf/R/R46462>

ADMINISTRATION:

RECORD RETENTION AND STORAGE

It is the common practice of Sonoma County homeless service providers to retain paper records for 7 years. The Continuum of Care's preference is that all data be entered into HMIS. HMIS meets all HIPAA, privacy and security requirements, more completely than most paper systems. Private user information can be drawn from the meta-data. Participating providers may scan documents and upload them to HMIS. Under HUD's data standards, the HMIS vendor will be responsible for regular secure storage of data retained beyond the required periods. To the extent possible, providers will move toward such electronic records, with the understanding some agencies will be required to retain paper records for monitoring by their funders

Files containing personal information shall be stored in locked and safe locations to maintain confidentiality. Shelter providers will maintain policies and procedures that detail their agency's retention times and how release information requests are processed.

ELIGIBLE ACTIVITIES

24 CFR § 576.102 states: Subject to the expenditure limit in § 576.100(b), ESG funds may be used for costs of providing essential services to homeless families and individuals in emergency shelters, renovating buildings to be used as emergency shelter for homeless families and individuals, and operating emergency shelters.

For a complete list of eligible activities please see: 24 CFR § 576.102
<https://www.law.cornell.edu/cfr/text/24/576.102>

HMIS

Shelter Providers must actively document within the HMIS and do so within accordance with the HMIS Policies and Procedures. Programs are required to document enrollments and exits in HMIS within a 5-day period for the purpose of live bed management. More information about HMIS data standards can be found at.

<https://files.hudexchange.info/resources/documents/HMIS-Data-Standards-Manual.pdf>

As a requirement from [HUD](#), some individuals may not wish to provide their personal identifiable information into the HMIS. An individual or family can refuse to participate in HMIS, and the provider must still offer all the same services to that household. However, some information may be required by projects to determine eligibility for housing or services, or to assess needed services. Therefore, although program participants are not required to participate in HMIS, they will need to provide personal information in order to be determined eligible for particular resources.

Individuals who refuse to provide their information in the HMIS, will be given a unique code within the HMIS, and providers must explain that this may deem them ineligible for certain projects. For more information on how to enroll clients in the HMIS without identifiable information, please use the following link to access this information: <https://sonomacounty.ca.gov/CDC/Homeless-Services/Sonoma-County-HMIS> (HMIS Forms and Guidelines: [How to Anonymously Enter a Client into HMIS](#))

REPORTING

Programs are required to be timely on any required reporting. If a program is not able to meet the deadline for a required report, the program administration will provide notice of an estimated time from for when reports can be received.

PROGRAM MONITORING

Shelter providers can expect the Sonoma County Community Development Commission to monitor their program annually to ensure adherence to these standards.

RESOURCES

Shelter providers are encouraged to use all of the resources that HUD makes available to providers to better understand program rules and regulations and to better implement programs. Below are resources that can assist providers.

- HUD Exchange: CoC and ESG Virtual Binders: <https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/>
- HUD Exchange: ESG requirements: <https://www.hudexchange.info/programs/esg/esg-requirements/>
- CoC interim Rule: <https://www.govinfo.gov/content/pkg/CFR-2017-title24-vol3/xml/CFR-2017-title24-vol3-part578.xml>

EXHIBITS

Last updated 02/22/2023

HOMELESSNESS DEFINITIONS

Homelessness in Sonoma County is determined by HUD definition. Please click link for a chart:

https://files.hudexchange.info/resources/documents/HomelessDefinition_Recordkeeping_RequirementsandCriteria.pdf

ACCEPTABLE FORMS OF IDENTIFICATION

- Valid driver's license or identification card issued by DMV
- Valid driver's license or identification card from the state or country of origin
- Birth Certificate
- United States Passport
- Foreign passport
- Verification of citizenship, alienage, or immigration status
 - Permanent Resident Card or Alien Registration Receipt Card
 - Employment Authorization Document (Card) that contains a photograph
 - Green Card
 - Work Visa
- Certificate of Naturalization or Citizenship
- American Indian Card
- Voter's registration card
- US military card
- Military dependent's ID card
- Social Security Card or Tax ID number
- State Benefits Card

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Continuum of Care (CoC)

SONOMA COUNTY CONTINUUM OF
CARE
RAPID REHOUSING PROGRAM
STANDARDS

DRAFT

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Rational

The Continuum of Care (CoC) Program Interim Rule requires CoCs to establish and follow written standards for providing CoC assistance in consultation with recipients of the Emergency Solutions Grants (ESG) program (24 CFR 578.7(9)). The ESG Program Interim Rule requires the ESG recipient to establish and consistently follow written standards for providing assistance with ESG funds (24 CFR 576.400 (e)). At a minimum, these written standards must include:

- Policies and procedures for evaluating individuals’ and families’ eligibility for assistance in the CoC and ESG Program;
- Policies and procedures for determining and prioritizing which eligible individuals and families will receive assistance for Street Outreach, Emergency Shelter, Homelessness Prevention (HP), Permanent Supportive Housing (PSH), Transitional Housing (TH), and Rapid Re- Housing (RRH);
- Standards for determining what percentage of rent a program participant must contribute while enrolled in a RRH or HP project.

The County of Sonoma’s Continuum of Care has adopted the following standards of care for Rapid Rehousing (RRH). This document provides guidelines for operating local RRH programs. Rapid re-housing rapidly connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services. Providers working collaboratively on these standards have also contributed their own best practices to its development. The core components of the RRH program are housing location, move-in assistance, short to medium-term rental assistance, and ongoing case management. While a Rapid Re-housing program must have all three components available, it is not required that a single entity provide all three services not that a household utilize them. Agencies must either provide all of these components or have an established relationship with another agency to provide those services.

Program Standards serve as a common policy framework and the minimum standards for Sonoma County’s RRH programs. All projects funded under the CoC Program, Emergency Solutions Grant (ESG) Program, shall apply the following standards consistently for the benefit of all program participants. The CoC strongly encourages projects that do not receive the above-mentioned funds to accept and utilize these standards.

GUIDING PRINCIPLES

HOUSING FIRST

On September 29, 2016, Governor Jerry Brown signed Senate Bill 1380, making California a Housing First state. This requirement applies to any program providing housing or housing-based services to people experiencing homelessness or at risk of experiencing homelessness, whether or not the program was designed to address homelessness.

The Housing First model is an approach to serving people experiencing homelessness that recognizes a homeless person must first be able to access a decent, safe place to live, that does not limit the length of stay (permanent housing), before stabilizing, improving health, reducing harmful behaviors, or increasing income.

Under the Housing First approach, anyone experiencing homelessness should be connected to a permanent home as quickly as possible, and programs should remove barriers to accessing housing, like requirements for sobriety or absence of criminal history. It is based on the “hierarchy of need” where people must access basic necessities—like a safe place to live and food to eat—before being able to achieve a quality of life or pursue personal goals.

TRAUMA-INFORMED CARE

Sonoma County homeless service providers seek to provide a trauma-informed system of care. Trauma-informed services should include case management; onsite integrated health resources; ACEs-based programs; living skills programs focused on communication skills, grief/loss, and well-being.

OPERATIONS

COORDINATION WITH COORDINATED ENTRY

Rapid Rehousing providers will notify the CES operator when an opening is available, and whenever possible, advanced notice is provided so as to minimize the length of time of vacancies.

ELIGIBILITY

Target populations:

RRH is an effective intervention for many types of households experiencing homelessness, including those with no income, with disabilities, and with poor rental history. The only exceptions are households that can exit homelessness with little or no assistance, those who experience chronic homelessness and who need permanent supportive housing, and households who are seeking a therapeutic residential environment.

PRIORITIZATION FOR RAPID REHOUSING

Coordinated Entry will refer eligible clients to projects upon request. Clients referred will have a Total Prioritization Score of 4-8. Participants who receive referrals prioritized according to community standards and scoring between 4 and 8 on the Total Prioritization Score shall be prioritized for Rapid Rehousing services first before moving to scores below 4. Clients may also be referred through the Enhanced Assessment and Prioritization procedure, using the Housing Mitigation Form and CES Case Conference to assess the strengths and abilities of higher scoring clients to succeed in RRH. Please reference the CES Policies and Procedures for exceptions and updates to RRH CES prioritization described in these standards.

REJECTION OF REFERRALS

Only four standardized options are available for rejecting a referral from Coordinated Entry: the participant does not meet eligibility requirements, the project is not currently accepting applications, the participant has disappeared or is not able to be located, or the participant refused the housing offer. Providers may not reject a referral without a consensus approval of all parties present at CES Case Conference.

REJECTION STANDARDS

Does not meet eligibility requirements:

The CoC maintains a public website with eligibility requirements for all projects in the CoC's geographic area participating in Coordinated Entry. A housing provider may reject a referral only if the participant does not meet basic published eligibility requirements, inclusive of (when applicable) immediate safety risk or meeting activities of daily living (ADLs), or the provider has exhausted all options to document eligibility. Examples include single adults that were part of a family unit when assessed and have been referred to a families-only project, or non-veterans attempting to access SSVF funded units. An agency may not reject a participant on presumed "fit" in housing or shelter. An agency may not reject a participant due to barriers in documenting eligibility without exhausting all possible options first.

Program no longer accepting applications:

If a program is no longer accepting applications, the referring agency and CE will work together to redirect the referral to another program within HMIS. This includes instances when a project serves multiple populations (ex: individuals and families) but only has openings for one population at a given type.

Unknown/disappeared

If referring agencies have exhausted all options to contact a referral, they may request to decline the referral as “unknown/disappeared.” Every attempt shall be made to contact the participant, including physical outreach, contacting HOST workers, Coordinated Entry staff, and all known service providers.

Participant refused offer

If a participant refuses a referral. See Right of Refusal policy in Coordinated Entry Policies and Procedures.

PROGRAM DESIGN

Sonoma County RRH providers will work consistently within the frame of Housing First, as it applies to various forms of funding and target demographics.

There are various vulnerable populations in need of housing services in Sonoma County including, but not limited to, survivors of domestic violence or trafficking, and transitional age youth. There is a variety of potential funding streams for RRH programs when more flexible funding is available, agencies are encouraged to work with County staff to ensure that any flexibility (per the funding specific guidelines) is utilized to more efficiently serve the homeless population in our community.

All RRH participants must meet the federal definition of 'Literally Homeless' or 'Fleeing/ Attempting to Flee domestic violence and be referred through the Coordinated Entry System. Homeless verification must be gathered by providers prior to entry despite enrollment in CES.

- ESG Regulation Category 1 & 4 only, those who meet category 4 must also be literally homeless (24 CFR part 576.104)
- CoC Regulation: Eligible categories of homelessness can change from year to year. Providers must ensure that they follow the eligibility criteria for the CoC NOFA/NOFO in the year of their original award

VARIANCE

As previously mentioned, Emergency Solutions Grants (ESG) will be the guiding regulations for RRH programs in Sonoma County. ESG Regulations guide project models and service delivery. A project may be guided by ESG regulations and project definitions despite not having ESG dollars in their budget. If a different funding source offers more flexible use of funds, or a variance is needed to better serve clients experiencing homelessness, RRH providers may submit a variance request to the Sonoma County Department of Health Services Ending Homelessness team for support and consideration. Information on requesting variances can be found at <https://sonomacounty.ca.gov/CDC/Homeless-Services/Providers/>

Variance requests do not pertain to the CoC Program rapid-rehousing projects. If the agency receives CoC RRH dollars, CoC Program regulations will guide use of funds.

WAIVERS

If waivers to the normal ESG regulations are available for more flexible uses of RRH funding, providers are encouraged to contact CDC staff to ensure they remain in compliance with the waivers and regulations.

Waivers through the CoC Program are only available as released by HUD. Waivers are to be requested directly through HUD for approval. CoC recipients should communicate these requests to the Sonoma County Department of Health Services Ending Homelessness Team if requested and if approved.

VERIFICATION OF ELIGIBILITY

RRH providers are responsible for the verification of eligibility. The preference is for third party documentation. Second party documentation (observation by a homeless services provider) is acceptable if third party documentation is not available. At a minimum, client self-certification will be accepted. Lack of 3rd party documentation must not prevent an individual or family from being immediately admitted to a RRH program. Records contained in an HMIS or comparable database used by victim service or legal service providers are acceptable evidence of 3rd party documentation and intake worker observations. See Record Keeping section below for more information.

DETERMINING AMOUNT AND DURATION OF RENTAL ASSISTANCE

DURATION OF ASSISTANCE

RRH providers will create individualized service plans with program participants to support the participant while maximizing the use of limited funds. The maximum length of time a program participant may receive rental assistance through ESG is 24 months during any 3-year period. Short term rental assistance is for up to 3 months. Medium-term rental assistance is for more than 3 months, but not exceeding 24 months. Payment of rental

arrears consists of a one-time payment for up to 6 months of rent in arrears, including any late fees on those arrears. The limit of up to 24 months of payments must include the arrears payments. For example, if a participant received assistance for 6 months of rental arrears, the maximum amount of monthly rental assistance they may receive is 18 months. Providers must run a report in HMIS to determine if the client received previous RRH assistance and adjust the duration of assistance accordingly.

Under the CoC Program, rental assistance can be provided for up to 24 months and the provider can provide supportive services to the participant no longer than 6 months after the rental assistance stops.

RE-EVALUATIONS

RRH providers must reevaluate a program participant's eligibility not less than once annually. At a minimum, each re-evaluation of eligibility must establish that;

- 1) The program participant does not have income that exceed the income limit for continued service. This limited is dependent on funding source. See below
 - a. ESG/CoC RRH: Program participant's income cannot exceed 30% AMI
 - b. ESG-CV: Program participant's income cannot exceed 50% AMI
- 2) The program participant lacks sufficient resources and support networks necessary to retain housing without ESG assistance.

RRH providers may require each program participant receiving RRH assistance to notify the RRH provider regarding changes in the program participant's income or other circumstances (*e.g.*, changes in household composition) that affect the program participant's need for assistance under ESG. When notified of a relevant change, the recipient or subrecipient must re-evaluate the program participant's eligibility and the amount and types of assistance the program participant needs.

For recording keeping requirements for re-evaluations, see "Record Retention and Storing" below.

AMOUNT OF RENTAL ASSISTANCE

RRH providers will establish policies and procedures to determine how much assistance to provide a participant on an individual basis. These policies and procedures must comply with the Rent Reasonableness and Fair Market Rent standards while making every effort to maximize funds. Below are some examples of how assistance may be administered.

A RRH provider may design RRH rental assistance so that:

- each program participant pays a fixed percentage of income toward rent;

- each program participant pays a rent contribution based on an incremental, sliding scale;
- each program participant pays a fixed amount or percent of the rent (e.g., \$1000 per month or 50% of the monthly rent); or
- each program participant pays a rent contribution that increases over time until the program participant is paying 100% of the monthly rent

ROOM SHARE RENTAL

ESG or ESG-CV funds may be used under the Rapid Rehousing or Homelessness Prevention component to help eligible program participants who are **not part of the same household** rent a shared unit – including shared room arrangements if safe and appropriate – as long as they meet ESG standards as defined below. However, to be considered a separate household for ESG eligibility, each household assisted with ESG rental assistance must have a **separate lease** with the property owner or a sublease with the primary leaseholder if ESG-CV or annual ESG (used for COVID purposes) funds are used.

With regard to being placed with roommates, as with all tenant-based rental assistance, it is up to the program participant to select a housing unit in which to live and the people with whom they will share that housing (if any). While the ESG Interim Rule does not prohibit **sharing a bedroom** or housing unit, HUD recommends that when using such a model, a recipient/sub recipient carefully assesses the needs of each program participant and the appropriateness of the shared living situation for the individual. For some program participants, a roommate situation may not support long-term stability in permanent housing. However, CoC Program rental assistance funds can only be used in a shared bedroom situation if the participants present as a household.

If a recipient/subrecipient is going to house people in shared housing/roommate situations, there are certain requirements that must be met, and other considerations to keep in mind.

1. The purpose of ESG assistance is to help program participants *achieve stability in permanent housing*. ESG funds may not be used to move an individual or family into a situation the provider knows will not be stable.
2. Conducting an inspection may also help the recipient/subrecipient assess whether this can be a permanent living situation for the program participant.

Additionally, the RRH provider must make sure that the assisted unit meets with Fair Market Rent (FMR) and Rent Reasonableness standards. CoC RRH funds can be above FMR as long as the unit is still found to be Rent Reasonable. Providers are encouraged to seek guidance from the CDC if they are considering placement of a program participant in a shared room situation.

SOBER LIVING ENVIRONMENT (SLE)

In very limited circumstances it is possible to use ESG or ESG-CV funds to provide rental assistance to help an individual who would reside in a shared room or Sober Living Environment (SLE). For this to be possible, the individual must be an eligible program participant and the unit must qualify as permanent housing. Please note, however, as provided by the CARES Act and section III.F.12 of [Notice CPD-21-08](#), people experiencing homelessness cannot be required to receive treatment or perform any other prerequisite activities as a condition for receiving shelter, housing, or other services funded with ESG grants provided under the CARES Act. Therefore, ESG-CV/annual ESG funds used to prevent, prepare for, and respond to coronavirus cannot be used if the program requires any prerequisites, including sobriety for admission or ongoing residence, testing, or treatment.

If the program does not require program participants to perform any prerequisite activities as a condition for receiving assistance, a subrecipient could focus their program on providing services for individuals in recovery. However, access to rental assistance cannot be limited to those in recovery. A subrecipient may target this subpopulation, but they would be required to serve any eligible individual or family seeking rental assistance, regardless of recovery needs.

To determine whether it is possible to help this individual with ESG assistance, you will need to consider multiple factors including whether the housing is considered permanent and whether the unit complies with rent reasonableness and Fair Market Rent (FMR) standards. The CDC has received HUD guidance on how to properly determine if a shared unit can be approved and how to properly calculate utility rates in a shared situation. RRH providers are encouraged to contact the CDC for guidance if they are considering placement of a program participant in an SLE.

HABITABILITY STANDARDS

All units that are assisted with RRH funds must meet the applicable Housing Standards under 24 CFR § 576.403 (a) (c). All units must be inspected and meet the minimum standards mentioned above prior to any assistance being paid for the unit. Units must pass a Housing Quality Standards (HQS) inspection within one month of move in. If the unit has been inspected by another agency within 1 month of move in, a new inspection is not required however, the RRH file must contain a copy of the inspection report and verification that any noted deficiencies have been remedied.

LEAD-BASED PAINT DISCLOSURE/HUD'S LEAD SAFE HOUSING RULE

LEAD-BASED PAINT DISCLOSURE

RRH providers must establish policies and procedures describing how they will comply with [HUD/EPA’s Lead-Based Paint Disclosure](#) and [HUD’s Lead Safe Housing Rule](#). Congress passed the Residential Lead-Based Paint Hazard Reduction Act of 1992, also known as Title X, to protect families from exposure to lead from paint, dust, and soil. Section 1018 of this law directed HUD and EPA to require the disclosure of known information on lead-based paint and lead-based paint hazards before the sale or lease of most housing built before 1978.

HUD/EPA’s Lead-Based Paint Disclosure requires that before any rental contract is executed, landlords must;

- Give an EPA-approved information pamphlet on identifying and controlling lead-based paint hazards (“Protect Your Family From Lead In Your Home” pamphlet, currently available in English, Spanish, Vietnamese, Russian, Arabic, Somali) to RRH program participants.
- Disclose any known information concerning lead-based paint or lead-based paint hazards. The landlord must also disclose information such as the location of the lead-based paint and/or lead-based paint hazards, and the condition of the painted surfaces.
- Provide any records and reports on lead-based paint and/or lead-based paint hazards which are available to the seller or landlord (for multi-unit buildings, this requirement includes records and reports concerning common areas and other units, when such information was obtained as a result of a building-wide evaluation)
- Include an attachment to the contract or lease (or language inserted in the lease itself) which includes a Lead Warning Statement and confirms that the landlord has complied with all notification requirements. This attachment is to be provided in the same language used in the rest of the contract. Landlords, and agents, as well as tenants, must sign and date the attachment.

LEAD-SAFE HOUSING RULE

The Lead Safe Housing Rule applies to all target housing that is federally owned and target housing receiving Federal assistance. Assisted units that were built before 1978 must be screened for lead-based paint concerns. RRH providers will use the [HPRP Lead-screening worksheet](#) to guide providers through lead-based paint inspections, to document any exemptions that may apply to identify whether any potential hazards have been identified and if safe work practices and clearance are required and used. A copy of the completed worksheet, compliance steps completed to ensure safe and decent housing units when children under six are living in the unit, and Lead hazard information and documentation kept by landlords should be maintained in participant files.

MONITORING

Lead-agency staff will monitor RRH projects for compliance with the Lead-Safe Housing Rule and Lead-based paint exposure. Participant files must contain documentation listed above to comply with HUD/EPA's lead-based paint disclosure requirements as well as evidence that the RRH provider has completed the HPRP lead screening worksheet.

RENT REASONABLENESS AND FAIR MARKET RENT

The ESG program Interim Rule allows for RRH rental assistance to be provided to eligible participants only when the rent, including utilities (gross rent), does not exceed the Fair Market Rent established by HUD for each geographic area **AND** the rent is determined to be reasonable as established under 24 CFR 982.507. FMR is published by HUD annually by fiscal year for 530 metropolitan areas. Current FMRs can be found here:

<https://www.huduser.gov/portal/datasets/fmr.html>

The CoC Program Interim Rule permits rental assistance in units that are above FRM, as long as the unit is still found to be rent reasonable.

FAIR MARKET RENT

Whether a household is seeking to maintain its current housing or relocate to another unit to avoid homelessness (Homelessness Prevention) or exiting homelessness into new housing (Rapid Re-Housing), the process for determining acceptable rent amounts is the same:

- The recipient or subrecipient first compares the gross rent for the current or new unit within current FMR limits, which are updated annually. Gross rent is the cost of the rent and utilities that the tenant is responsible for paying. Utility costs include: gas, electric, water, sewer, and trash. Telephone, cable, or internet costs are not included in determining gross rent.
- If the unit's gross rent is at or below FMR, the recipient/subrecipient next uses current data to determine rent reasonableness (more information is provided below on how to determine and document this).

RENT REASONABLENESS

The rent reasonableness standard is designed by HUD to ensure that the rent being paid is reasonable in comparison to similar units in the same market. In determining comparability, the RRH provider must consider the following elements where appropriate and practical: location, quality, size, type, and age of the unit, and any amenities, maintenance, and utilities to be provided by the owner. Comparable rents can be checked by using a market study of rents charged for units of different sizes in different locations or by reviewing advertisements for comparable rental units. Providers must develop their own policies and

procedures for determining if a rent is reasonable and this must be documented in the client file.

If the gross rent is at or below the FMR and is determined to be reasonable, ESG funds can be used to pay rental assistance. If the rent exceeds FMR or the rent is not reasonable, ESG funds cannot be used to pay rental assistance. However, these requirements do not apply when a participant receives assistance with rental application fees, security deposits, moving costs, case management, legal services, and credit repair. If the reasonable rent is higher than the FMR and you are using CoC rental assistance funds, you can pay more than the FMR, up to the reasonable rent.

HUD's Rent Reasonable Checklist:

<https://files.hudexchange.info/resources/documents/RentReasonableChecklist.pdf>

PROGRAM TRANSFERS RRH-PSH

A participant may be transferred from a RRH program to a PSH program if the PSH program better meets their needs. Transfers must be approved through Coordinated Entry Case Conferencing using Enhanced Assessment and Prioritization. It is the responsibility of the outgoing RRH program to complete initial eligibility documentation for the incoming PSH program. Individuals must meet all PSH program requirements including chronic homelessness status at time of RRH housing date. Individuals or families who participate in a RRH project maintain their Chronically Homeless status while in the program. It is important to note that program participants maintain their Chronically Homeless status for purposes of eligibility for other programs. The RRH assisted unit is considered permanent housing therefore participants are not considered homeless for purposes of the CoC's point in time count.

PROGRAM TRANSFERS RRH-RRH

A participant may be transferred from one RRH program to another if one program better suits their needs. Decisions about these transfers will be completed at CES Case Conference, and will be done in coordination and agreement with both providers to ensure a warm handoff. Additionally, the duration of the assistance may not exceed 24 months in a 3-year period.

TRANSFERS TO OTHER HOUSING PROGRAMS

If a RRH participant has the ability to move to a different subsidized housing program like a Housing Choice Voucher, the participant may receive a second deposit to secure the unit. An additional deposit may also be paid to a transitional aged youth (TAY) who is aging out of a TAY RRH program. In general, if a RRH participant has an opportunity to transition to another assisted housing program, RRH providers are encouraged to contact the CDC to see what services the client may be eligible for.

PROGRAM TRANSFER

If a client requests an emergency transfer, the client has priority over all other applicants for ESG or CoC-funded housing assistance, **provided the household meets all eligibility criteria required by HUD and the program**. RRH providers should assist the client in accessing shelter, internally or externally, while they look for housing.

RESOURCES/HOTLINES

In all cases, please provide the individual seeking an emergency transfer or even contemplating an emergency transfer, with our local victims' services contact information. In case of an emergency, do not hesitate to call 9-1-1.

YWCA 24/7 domestic violence hotline: 707-546-1234

Verity 24/7 sexual assault crisis hotline: 707-545-7273

Family Justice Center Sonoma County (business hours only): 707-565-825

EMERGENCY TRANSFER RECORD KEEPING

To request an emergency transfer, the client should submit a written request to program staff, certifying that they meet the emergency transfer qualification requirements. The program may – but is not required to – request additional documentation of the occurrence for which the client is requesting an emergency transfer.

Programs must retain records of all emergency transfer requests and their outcomes for a period of 5 years following the grant year of the program in which the household was a participant and report them to HUD annually.

PROTECTION MEASURES FOR EMERGENCY TRANSFERS

Written verification of the client's situation or any documents pertaining to the abuse shall **not** be stored electronically in HMIS for protection. This includes uploaded documents as well as case notes.

The individual should be notified immediately during project entry of their right to enroll into the new project anonymously in HMIS to secure their personal information.

EXITS TO HOMELESSNESS

RRH providers endeavor to exit all participants into permanent housing. In the unfortunate and rare circumstance that the participant must be discharged from the RRH program into homelessness, the provider will attempt to offer the CES Assessment after discharge to

ensure the participant is entered back onto the By-Name-List for future housing opportunities.

GRIEVANCE PROCEDURE

RRH providers will develop their policies and procedures for participant grievances. Grievances include appeals of decisions that impact RRH participants (exits, extensions, etc.) and grievances regarding RRH policies or perceived unfair/inequitable treatment by agency staff. Participants should inform clients about their grievance policy upon intake or orientation. Copies of the grievance policy should be provided to participants upon intake into the RRH program. RRH staff will make grievance forms available to clients upon request. Clients should be informed of how their grievances will be handled and given a timeframe for the completion of each step of the process.

REASONABLE ACCOMMODATIONS

The Sonoma County Continuum of Care is committed to providing equal opportunity and reasonable accommodations to participants with disabilities to provide them with full access to RRH programs. RRH providers must develop their reasonable accommodation policies and communicate them clearly to RRH participants.

A reasonable accommodation is a change, exception, or adjustment to a program, service, building, or dwelling unit that will allow a qualified person with a disability to

- Participate fully in a program;
- Take advantage of a service;
- Live in a dwelling

To show that a requested accommodation may be necessary, there must be an identifiable relationship, or nexus, between the requested accommodation and the individual's disability. When a client requires an accessible feature(s), policy modification, or other reasonable accommodation, the program must provide the requested accommodation unless doing so would result in a fundamental alteration in the nature of the program or an undue financial and administrative burden. A fundamental alteration is a modification that is so significant that it alters the essential nature of the program. In such a case, if possible, the program will offer an alternative solution that would not result in fundamental alteration of the program or a financial or administrative burden. RRH providers will report the number of Reasonable Accommodation requests, as well as the number of denials and the reasons for denials on their quarterly reports.

NON-DISCRIMINATION

Services are provided to program participants are offered in a nondiscriminatory basis with respect to race; color; national origin or citizenship status; age; disability (physical or mental); religion; sex; sexual orientation or identity; genetic information; HIV or AIDS;

medical conditions; political activities or affiliations; military or veteran status; status as a victim of domestic violence, assault, or stalking; or any other federal, state or locally protected group.

Providers of the Continuum of Care are required to adhere to HUD's Equal Access Final Rule and HUD's Gender Identity Final Rule. Through the final rules, HUD ensures equal access to individuals in accordance with their gender identity in programs and shelter funded under programs administered by HUD's Office of Community Planning and Development (CPD). HUD's housing programs are open to all eligible individuals and families regardless of sexual orientation, gender identity, or marital status.

RENTAL ASSISTANCE AGREEMENTS

The rental assistance agreement between the RRH provider and the property owner must set forth the terms under which rental assistance is being provided. It must contain all of the requirements set forth in ESG regulation 24 CFR § 576.106(e) or CoC regulation 24 CFR § 578.51(a), depending on the project funding source.

LEASE REQUIREMENTS

Each RRH participant receiving assistance must have a legally binding lease for the rental unit. The lease must be between the owner and the program participant and must comply with all requirements set forth in ESG regulations 24 CFR § 576.106(g) or CoC regulation 24 CFR 578.51(L)(1), depending on the project funding source.

VIOLENCE AGAINST WOMEN ACT (VAWA) PROTECTIONS

[24 CFR 576.409](#) is the regulatory body for VAWA protections. VAWA protections apply to RRH participants.

HMIS COMPARABLE DATABASE

Domestic violence service providers (VSPs) are prohibited from maintaining participant data in the CoC's HMIS; instead, they are required to maintain participant data in an HMIS comparable database.

PROHIBITION ON RETALIATION

It is illegal for owners or managers of covered housing to discriminate against any person because that person has opposed any act or practice made unlawful by VAWA's housing provisions, or because that person testified, assisted, or participated in any related matter.

Additionally, it is illegal for an owner or manager of covered housing to coerce, intimidate, threaten, interfere with, or retaliate against any person who exercises or assists or encourages a person to exercise any rights or protections under VAWA's housing provisions.

RIGHT TO REPORT CRIME AND EMERGENCIES

Landlords, homeowners, tenants, residents, occupants, and guests of, and applicants for, housing shall have the right to seek law enforcement or emergency assistance on their own behalf or on behalf of another person in need of assistance. Also prohibited is penalizing or threatening to penalize persons because they request assistance or report criminal activity of which they are a victim or otherwise not at fault under the laws or policies adopted or enforced by covered governmental entities.

PROHIBITION ON DENIAL OR TERMINATION OF ASSISTANCE OR EVICTION ON THE SOLE BASIS OF DOMESTIC VIOLENCE

RRH program participants cannot be denied assistance, have their assistance terminated, or be evicted from their housing solely because they are a victim of domestic violence.

NOTICE OF OCCUPANCY RIGHTS UNDER THE VIOLENCE AGAINST WOMEN ACT

RRH providers that determine eligibility for or administer ESG rental assistance is responsible for providing the following two forms to each applicant for ESG rental assistance and each participant receiving ESG rental assistance:

- “Notice of Occupancy Rights under the Violence Against Women Act” (Form HUD5380), available [here](#)
- “Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking, and Alternative Documentation” (Form HUD-5382), available [here](#)

These forms must be provided at each of the following times:

- When an applicant is denied ESG rental assistance
- When an applicant’s application for a unit receiving project-based rental assistance is denied
- When a participant begins receiving ESG rental assistance
- When a participant is notified of termination of ESG rental assistance
- When a participant receives notification of eviction

LEASE BIFURCATION

When a family receiving tenant-based rental assistance separates under the lease bifurcation clause of 24 CFR 5.2009(a), the family’s tenant-based rental assistance and utility assistance, if any, shall continue for the family member(s) who are not evicted or removed.

If a family living in a unit receiving project-based rental assistance separates under the lease bifurcation clause of 24 CFR 5.2009(a), the family member(s) who are not evicted or

removed can remain in the assisted unit without interruption to the rental assistance or utility assistance provided for the unit.

VAWA LEASE LANGUAGE

RRH providers are required to ensure that the requirements listed under 24 CFR Part 5, Subpart L, are included or incorporated into all rental assistance agreements and leases for units that receive ESG-funded short-term or medium-term rental assistance. If a landlord-provided lease includes all protections listed in 24 CFR Part 5, Subpart L, subrecipients do not need to take any further action. Under most circumstances, however, subrecipients will need to provide and require a lease amendment including the necessary language. Subrecipients may choose between two options for VAWA lease amendments:

- Subrecipients may use the sample “Lease Addendum” (HUD-91067), provided [here](#)
- Subrecipients may create their own lease addendum, which must incorporate all protections listed in [24 CFR Part 5, Subpart L](#).

EMERGENCY TRANSFER PLAN

An Emergency Transfer Plan provides for emergency transfers for survivors of domestic violence residing in permanent housing while receiving rapid rehousing assistance.

A client qualifies for an emergency transfer if:

1. The client is a survivor of domestic violence, dating violence, sexual assault, human trafficking, assault, or stalking;
2. The client expressly requests the transfer; and
3. Either:
 - a. The tenant reasonably believes there is a threat of imminent harm from further violence if the tenant remains within the same dwelling unit that the tenant is currently occupying; or
 - b. In the case of a tenant who is a victim of sexual assault, either the tenant reasonably believes there is a threat of imminent harm from further violence if the tenant remains within the same dwelling unit that the tenant is currently occupying, or the sexual assault occurred on the premises during the 90-calendar-day period preceding the date of the request for transfer.

If a participant needs an emergency transfer, the RRH provider will assist the client in locating more suitable housing as quickly as possible. The provider will also refer the client to other services such as victim services providers and referrals to temporary housing options like shelter (internal and external shelters).

Additionally, the RRH provider will continue to assist the client until the client is able to secure alternate housing. The provider will bring the situation to the CES Operator, who will identify the next available RRH program, and when that program is accepting referrals convene a case conference between the three parties to coordinate transfer. The provider should also refer the client to centralized housing location services, if available, to assist in location of alternate housing.

PROGRAM INCOME

Program income is defined as “gross income earned by the RRH provider that is directly generated by a supported activity or earned as a result of the federal award during the period of performance.” Additional information about what constitutes program income can be found in 2 CFR 1201.80.

Few activities funded by ESG can or are likely to generate program income. If an ESG subrecipient generates program income, it is most likely because the subrecipient paid for a security deposit under the homelessness prevention (ESG-HP) or rapid re-housing (ESG-RRH) components, and some or all of the security deposit was returned to the subrecipient. Program income can also be generated if the RRH provider is collecting rent on a unit that the RRH provider master-leases for less than what is collected in rent.

SPENDING PROGRAM INCOME

Program income must be spent:

- By the subrecipient organization that generates it
- On eligible costs within the component that generated it
- Within the contract year during which it was generated

For example: if Acme Corporation, a subrecipient organization, generates \$900 in program income from a returned security deposit under its ESG-RRH project in FY 2022, it must spend that \$900 on ESG-RRH eligible activities before the end of the FY 2022 contract performance period.

PROGRAM INCOME AS MATCH

Costs paid by program income shall count toward meeting the subrecipient’s matching requirements, provided the costs are eligible ESG costs that supplement the subrecipient’s ESG program.

RECORDKEEPING

RRH providers are required to maintain records of their receipt and use of program income. These records must be kept in accordance with the financial records requirements in 24 CFR 576.500(u). Program income must be tracked separately from grant funds to ensure subrecipients can demonstrate that program income was spent in accordance with this Policy

SERVING UNDOCUMENTED INDIVIDUALS

I. PRWORA Restrictions and Exceptions

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (“PRWORA”) restricted undocumented individuals from accessing a number of public benefits, including housing and homeless services. However, the PRWORA also created exceptions that allow access, regardless of the recipients’ immigration status, to programs and services that:

- deliver in-kind services at the community level;
- do not condition the provision of assistance on the program participants’ income or resources; and
- are necessary for the protection of life or safety.
-

II. Guidance from the U.S. Attorney General and HUD

The U.S. Department of Justice (DOJ) interpreted the above three-prong test to mean that all individuals, regardless of immigration status, should be given access to:

- “Short-term shelter or housing assistance for the homeless, for victims of domestic violence, or for runaway, abused or abandoned children,” and
- “Programs, services, or assistance to help individuals during periods of heat, cold, or other adverse weather conditions.”

To date, U.S. Department of Housing and Urban Development (HUD) has not issued any similar guidance clarifying which of its homeless assistance programs are subject to PRWORA’s noncitizen eligibility restrictions.³ However, in 2016, HUD, DOJ and the U.S. Department of Health and Human Services (HHS) issued guidance specifying that the following programs and services shall remain accessible to all eligible individuals, regardless of immigration status:

- Transitional Housing (for up to two years, where the recipients or sub-recipients of government funds own or lease the housing)
- Street Outreach Services
- Emergency Shelters
- Safe Havens
- ***Rapid Rehousing***
-

III. Exceptions to Verification Requirements for “Nonprofit Charitable Organizations”

While the PRWORA generally requires government agencies to verify the immigration status of applicants for public benefit programs, “nonprofit charitable organizations” are ***not*** required to verify the immigration status of applicants for federal, state or local public benefits, including for Permanent Supportive Housing programs.

IV. Other Applicable Restrictions

Notwithstanding the PRWORA’s immigration-related restrictions, organizations or agencies that receive federal funding must not discriminate against individuals on the basis of race, national origin or any basis protected under the following:

- Title VI of the Civil Rights Act of 1964
- Fair Housing Act
- Violence Against Women Act

- Family Violence Prevention and Services Act
- Section 109 of Title I of the Housing and Community Development Act of 1974
- Any other applicable nondiscrimination law
- In addition, HUD, HHS and DOJ have advised that:
- *“Denying an individual a public benefit or treating an individual differently because of that individual’s race or national origin would violate one or more of these statutes. For example, a recipient of federal financial assistance may not deny benefits to applicants because they have ethnic surnames or origins outside the United States. Nor may the recipient single out individuals who look or sound “foreign” for closer scrutiny or require them to provide additional documentation of citizenship or immigration status. Also, because individuals might come from families with mixed immigration status, there may be some family members who are eligible for all benefits and others who are not eligible or who can receive only a more limited subset of those benefits. Therefore, benefits providers must ensure that they do not engage in practices that deter eligible family members from accessing benefits based on their national origin”.*

Useful links:

- Full text of the PRWORA: <https://www.congress.gov/104/plaws/publ193/PLAW-104publ193.pdf>
- Joint Letter: <https://files.hudexchange.info/resources/documents/HUD-HHS-DOJ-Letter-Regarding-Immigrant-Access-to-Housing-and-Services.pdf>
- HUD Fact Sheet: <https://files.hudexchange.info/resources/documents/PRWORA-Fact-Sheet.pdf>
- DOJ Interim Guidance: <https://www.govinfo.gov/content/pkg/FR-1997-11-17/pdf/97-29851.pdf>
- CRS Report: <https://crsreports.congress.gov/product/pdf/R/R46462>

ADMINISTRATION

RECORD RETENTION AND STORAGE

It is the common practice of Sonoma County homeless service providers to retain paper records for 7 years. The Continuum of Care’s preference is that all data be entered into HMIS. HMIS meets all HIPAA, privacy and security requirements, more completely than most paper systems. Private user information can be drawn from the meta-data. Participating providers may scan documents and upload them to HMIS. Under HUD’s data standards, the HMIS vendor will be responsible for regular secure storage of data retained beyond the required periods. To the extent possible, providers will move toward such electronic records, with the understanding some agencies will be required to retain paper records for monitoring by their funders

Files containing personal information shall be stored in locked and safe locations to maintain confidentiality. Shelter providers will maintain policies and procedures that detail their agency’s retention times and how release-of-information requests are processed.

RECORDKEEPING AND REPORTING: INTAKE AND ELIGIBILITY

RRH providers will maintain policies and procedures to ensure compliance with the homelessness definition defined in [24 CFR 576.2](#). Procedures must require documentation of homeless status at intake relied upon to establish and verify homeless status. The procedure will reflect HUD’s order of priority for obtaining evidence of homeless status

- 1) Third-party documentation

- 2) Intake worker observations
- 3) Self-certification

Records contained in an HMIS,

or comparable database used by victim service providers or legal service providers are acceptable evidence of third-party documentation. Where third-party documentation is not obtainable, a written record of the intake worker's due diligence in attempting to obtain the evidence will be maintained with the self-certification.

RECORD KEEPING: RE-EVALUATIONS AND INCOME CALCULATION

When determining annual income of an individual or family, the RRH provider must use the standard for calculating annual income under [24 CFR 5.609](#). The following documentation of annual income must be maintained:

- (1) Income evaluation form containing the minimum requirements specified by HUD and completed by RRH provider; and
- (2) Source documents for the assets held by the program participant and income received over the most recent period for which representative data is available before the date of the evaluation (*e.g.*, wage statement, unemployment compensation statement, public benefits statement, bank statement);
- (3) To the extent that source documents are unobtainable, a written statement by the relevant third party (*e.g.*, employer, government benefits administrator) or the written certification by the recipient's or subrecipient's intake staff of the oral verification by the relevant third party of the income the program participant received over the most recent period for which representative data is available; or
- (4) To the extent that source documents and third-party verification are unobtainable, the written certification by the program participant of the amount of income the program participant received for the most recent period representative of the income that the program participant is reasonably expected to receive over the 3-month period following the evaluation.

RECORD KEEPING: LEASE UP DOCUMENTS

Each program participant file must contain the following lease-up documents;

- An executed, legally binding written lease or sublease and rental assistance agreement, which also addresses late payment requirements;
- Evidence that each program participant resides in a housing unit that has met, or passed, the ESG minimum habitability or alternative standards threshold; and

- Evidence of an analysis and documentation showing that ESG rental assistance was only provided to units for which the rent complied with HUD's standard of rent reasonableness and Fair-Market Rent.
- For CoC RRH programs, evidence of an analysis and documentation showing that CoC rental assistance was only provided to units for which the rent complied with HUD's standard of rent reasonableness.

RECORD KEEPING: LEAD-BASED PAINT REQUIREMENTS

Each program participant must contain the following documents

- Evidence that the program participant was provided with EPA's "Protect Your Family from Lead" pamphlet.
- Leases with adequate lead-based paint disclosure information.
- A copy of a completed HPRP Lead-Based Paint Screening worksheet. 23
- If analysis determines the presence of lead-based paint, evidence of further evaluation and stabilization efforts.

RECORD KEEPING: SERVICES PROVIDED & PAYMENTS MADE ON BEHALF OF PROGRAM PARTICIPANTS

In accordance with [24 CFR 576.500\(f\)\(1\)](#), RRH providers must maintain records for each program participant that document:

- The services and assistance provided to that program participant, including, as applicable, the security deposit, rental assistance, and utility payments made on behalf of the program participant.

RECORD KEEPING: EQUIPMENT

In accordance with [2 CFR 200.313](#), equipment must be used by the RRH provider in the program or project for which it was acquired as long as needed, whether or not the project or program continues to be supported by the Federal/State award, and the RRH provider must not encumber the property without prior approval of the awarding agency. The awarding agency may require the submission of the applicable common form for equipment. When no longer needed for the original program or project, the equipment may be used in other activities supported by the awarding agency, in the following order of priority:

- Activities under a Federal/State award from the Federal/State awarding agency which funded the original program or project, then
- Activities under Federal/State awards from other Federal/ awarding agencies. This includes consolidated equipment for information technology systems.

During the time that equipment is used on the project or program for which it was acquired, the RRH provider must also make equipment available for use on other projects or

programs currently or previously supported by the Federal Government, provided that such use will not interfere with the work on the projects or program for which it was originally acquired. First preference for other use must be given to other programs or projects supported by awarding agency that financed the equipment and second preference must be given to programs or projects under Federal awards from other Federal awarding agencies. Use for non-federally funded programs or projects is also permissible. User fees should be considered if appropriate.

Notwithstanding the encouragement in [§ 200.307](#) to earn program income, the RRH provider must not use equipment acquired with the Federal/State award to provide services for a fee that is less than private companies charge for equivalent services unless specifically authorized by Federal statute for as long as the Federal Government retains an interest in the equipment.

When acquiring replacement equipment, the RRH provider may use the equipment to be replaced as a trade-in or sell the property and use the proceeds to offset the cost of the replacement property.

MANAGEMENT REQUIREMENTS

Procedures for managing equipment (including replacement equipment), whether acquired in whole or in part under a federal/state award, until disposition takes place will, as a minimum, meet the following requirements:

- (1) Property records must be maintained that include a description of the property, a serial number or other identification number, the source of funding for the property, who holds title, the acquisition date, and cost of the property, percentage of Federal/State participation in the project costs for the Federal/State award under which the property was acquired, the location, use and condition of the property, and any ultimate disposition data including the date of disposal and sale price of the property.
- (2) A physical inventory of the property must be taken, and the results reconciled with the property records at least once every two years.
- (3) A control system must be developed to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft must be investigated.
- (4) Adequate maintenance procedures must be developed to keep the property in good condition.
- (5) If the RRH provider is authorized or required to sell the property, proper sales procedures must be established to ensure the highest possible return.

DISPOSITION

When original or replacement equipment acquired under a Federal/State award is no longer needed for the original project or program or for other activities currently or previously supported by a Federal/State awarding agency, except as otherwise provided in Federal statutes, regulations, or Federal awarding agency disposition instructions, the RRH provider must request disposition instructions from the awarding agency if required by the terms and conditions of the Federal/State award. Disposition of the equipment will be made as follows, in accordance with Federal/State awarding agency disposition instructions:

- (1) Items of equipment with a current per unit fair market value of \$5,000 or less may be retained, sold or otherwise disposed of with no further responsibility to the Federal/State awarding agency.
- (2) Except as provided in [§ 200.312\(b\)](#), or if the Federal awarding agency fails to provide requested disposition instructions within 120 days, items of equipment with a current per-unit fair market value in excess of \$5,000 may be retained by the RRH provider or sold. The Federal/State awarding agency is entitled to an amount calculated by multiplying the current market value or proceeds from sale by the Federal/State awarding agency's percentage of participation in the cost of the original purchase. If the equipment is sold, the Federal/State awarding agency may permit the RRH provider to deduct and retain from the Federal share \$500 or ten percent of the proceeds, whichever is less, for its selling and handling expenses.
- (3) The RRH provider may transfer title to the property to the Federal Government or to an eligible third party provided that, in such cases, the RRH provider must be entitled to compensation for its attributable percentage of the current fair market value of the property.
- (4) In cases where a RRH provider fails to take appropriate disposition actions, the Federal/State awarding agency may direct the RRH provider to take disposition actions.

RECORD KEEPING: SOURCE DOCUMENTATION

All financial costs must be documented in accordance with [2 CFR 200.403 \(g\)](#). RRH providers must keep documentation showing that program funds were spent on allowable costs in accordance with the requirements for eligible activities. All financial costs must show when the expense occurred, a prepared invoice or receipt and proof of payment.

For projects supported by multiple sources of funds, the project must include general ledgers that reflect revenue that was expensed by each funding source. If this is staff time, the general ledger must show how many hours the staff spent on each source. For all other expenses, the general ledger must reflect the percentage that the project was supported by each funding source.

CARRY OVER PROCESS

Funding Agreements for Homeless Services projects, funded through The Sonoma County Continuum of Care, allocate funding on a Fiscal Year basis. These one-year Funding Agreements contain budgets that often consist of dollars from multiple sources comprised of State, Federal, and/or Local funds. SCCDC policy allows Rapid Rehousing (RRH) and Homeless Prevention (HP) projects to provide financial support such as rental assistance and utility assistance to program participants for up to 24 months during any three years. Since this is a time frame longer than the single year covered by the Funding Agreement, the Sonoma County Department of Health Services Ending Homelessness Team recognizes that situations may arise where Funding Agreements and/or funding sources are ending despite participants requiring ongoing service.

If program participants require ongoing services beyond the end date of the Funding Agreement and/or when one funding source is exhausted during the same fiscal year, participants may be able to continue with services despite the changing funding source. Subrecipients may ask to “carry over” those program participants to the period covered by the new funding source. This allowance can ensure that the participant receives ongoing services to the extent that they are eligible per the original funding source.

Potential changes in the funding levels, sources of funds, available dollars, or funding regulations may lead to fluctuations in the annual amount of public dollars available for homeless services. For this reason, Rapid Rehousing and Homelessness Prevention projects should not make guarantees of ongoing support past the end of the contract term. A copy of the “Request to Carry Over Program Participants” procedure can be found [here](#). For assistance with this process, please contact the Sonoma County Department of Health Services Ending Homelessness Team .

This section does not pertain to the CoC Program funded RRH projects.

ELIGIBLE COSTS

Some eligible costs are listed below however, RRH providers should refer to their funding agreements for a complete list of eligible activities.

Eligible activities for the ESG Program can be found here

<https://www.govinfo.gov/content/pkg/CFR-2018-title24-vol3/xml/CFR-2018-title24-vol3-part576.xml#seqnum576.104>

Eligible activities for the CoC Program can be found here:

<https://www.govinfo.gov/content/pkg/CFR-2017-title24-vol3/xml/CFR-2017-title24-vol3-part578.xml>

RENTAL ASSISTANCE

- ESG Rental Assistance
 - Short-term rental assistance (up to 3 months)
 - Medium-term rental assistance (4 to 24 months)
 - Rental arrears (one-time payment of up to 6 months of rent in arrears, including any late fees on those arrears)
- CoC Rental Assistance
 - Short-term rental assistance (up to 3 months)
 - Medium-term rental assistance (4 to 24 months)

RENTAL ASSISTANCE TYPE

- Tenant-based rental assistance
- Project-based rental assistance
 - If the recipient or subrecipient identifies a permanent housing unit that meets ESG requirements and becomes available before a program participant is identified to lease the unit, the recipient or subrecipient may enter into a rental assistance agreement with the owner to reserve the unit and subsidize its rent in accordance with the requirements found in 24 CFR 576.106 (i) Please contact the Sonoma County Department of Health Services Ending Homelessness Team for guidance on project based RRH assistance.

HOUSING LOCATION AND STABILIZATION

- ESG Financial Assistance Costs
 - Rental application fees
 - Security deposits (up to 2 months)
 - Last month's rent
 - Utility deposits and payments (up to 24 months, including up to 6 months for payments in arrears)
 - Moving costs
- CoC Financial Assistance Costs
 - Security deposits (up to 2 months)
 - First and last month's rent
 - Property damage

- ESG Supportive Service Costs
 - Housing search and placement
 - Housing stability case management
 - Mediation
 - Legal services
 - Credit repair

- CoC Supportive Services Costs
 - Case management
 - Child Care
 - Education Services
 - Employment assistance and job training
 - Food
 - Housing search and counselling services including mediation, credit repair, and payment of rental application fee
 - Legal services
 - Life Skills training
 - Mental Health services
 - Moving Costs
 - Outpatient health services
 - Outreach services
 - Substance abuse treatment services
 - Transportation

HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)

All RRH providers are required to participate in HMIS in accordance with 24 CFR 578. Providers are required to receive referrals from CES through HMIS and to complete all entry, annual and exit touchpoints.

Victim Service Providers (VSP) are prohibited from participation in HMIS and must maintain client records through a comparable database.

REPORTING

Programs are required to be timely on any required reporting. If a program is not able to meet the deadline for a required report, the program administration will provide notice of an estimated time frame for when reports can be received. For detailed reporting requirements view agency contract/grant. Reports can be made available upon request by contacting the Sonoma County Department of Health Services Ending Homelessness Team.

PROGRAM MONITORING

RRH providers can expect the Sonoma County Department of Health Services Ending Homelessness Team to monitor their program annually to ensure adherence to these standards.

In addition to monitoring by the Sonoma County Department of Health Services Ending Homelessness Team, CoC Program RRH providers and are subject to direct HUD monitoring.

RESOURCES

RRH providers are encouraged to use all of the resources that HUD makes available to providers to better understand program rules and regulations and to better implement programs. Below are resources that can assist providers:

- HUD Virtual Binders Rapid Re-Housing Program Components
<https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/esg-program-components/rapid-re-housing/>
- ESG Laws and Regulations
https://www.hud.gov/program_offices/comm_planning/esg/regulations
- ESG program Interim Rule: <https://www.hudexchange.info/resource/1927/hearth-esg-program-and-consolidated-plan-conforming-amendments/>
- ESG Rent Reasonableness and FMR:
<https://www.hudexchange.info/resource/3070/esg-rent-reasonableness-and-fmr/>
- CoC Laws and Regulations:
https://www.hud.gov/program_offices/comm_planning/coc
- CoC Program Interim Rule: <https://www.hudexchange.info/resource/2033/hearth-coc-program-interim-rule/>
- CoC Rent Reasonableness and FMR:
<https://files.hudexchange.info/resources/documents/CoC-Rent-Reasonableness-and-FMR.pdf>
- Rapid Rehousing ESG v. CoC: <https://www.hudexchange.info/resource/2889/rapid-rehousing-esg-vs-coc/>
- 24 CFR 576: <https://www.law.cornell.edu/cfr/text/24/part-576>
- HUD Virtual Binders ESG/CoC: <https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/>
- CDC Service Providers webpage: <https://sonomacounty.ca.gov/CDC/Homeless-Services/Providers/>

SONOMA COUNTY RAPID RE-HOUSING PROGRAM FILE CHECKLIST

This document lists all documents that are required for a rapid re-housing participant file. Some documents listed may not be applicable to all RRH participants. Please refer to the Sonoma County Rapid re-housing standards for exemptions that may apply. Each item references the page of the standards where more information can be found. Lead-agency staff recommends that RRH providers keep a copy of this list in participant files to assist in monitoring.

- Verification of eligibility for RRH assistance (homelessness status). Priority: 3rd party documentation, intake worker observations, self-certification. (standards pgs. 21-22)
- Individualized service plans which document the duration of assistance. (Standards pg. 8-9)
- Calculation of income at intake and re-evaluation including source documents used to calculate income and assets. (Standards pg. 22)
- Lease-up documents (standards pgs. 22-23)
 - an executed legally binding written lease containing VAWA requirements listed under 24 CFR Part 5, Subpart L or [lease addendum](#)
 - rental assistance agreement between the landlord and the RRH program
 - Evidence unit meets ESG minimum habitability standards.
 - Evidence of Rent reasonableness examination.
 - Evidence unit is withing current Fair-market rent limits.
- Lead-based paint requirements (Standards pg. 23)
 - Evidence that the program participant was provided with EPA's "Protect Your Family from Lead" pamphlet.
 - Leases with adequate lead-based paint disclosure information.
 - A copy of a completed HPRP Lead-Based Paint Screening worksheet.
 - If analysis determines the presence of lead-based paint, evidence of further evaluation and stabilization efforts.
- Violence Against Women Act (VAWA) (standards pgs. 17-19):
 - Evidence that RRH participant was provided with "Notice of Occupancy Rights under the Violence Against Women Act"

- Evidence that RRH participant was provided with “Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking, and Alternative Documentation”
- Services provided and payments made on behalf of RRH participants (Standards pg. 23)
- Documentation related to equipment purchased with program funds. (standards pgs. 23-25)
- Variance requests (if applicable)
- Documentation of program transfer (if applicable)
- Documentation of emergency transfer plan (if applicable)
- Documentation of reasonable accommodations requested and granted (if applicable)
- Participant carry over form (if applicable)

DRAFT



Sonoma County Continuum of Care Coordinated Entry Advisory Committee Executive Summary

Item: 4. Coordinated Entry performance evaluation

Date: July 5, 2023

Staff Contact: Hunter Scott Hscott@homefirsatscc.org

Agenda Item Overview

Each quarter, HomeFirst conducts a performance evaluation survey. Below is a summary of the most recent CES performance report. HomeFirst will share a slide deck during the meeting with additional information.

Summary

From qualitative input session held on February 23rd, 2023:

- Positive: Feedback that operator staff are responsive and helpful in making connections between providers. CES forms have been updated and are better. Weekly case conference was cited as helpful and generating robust discussions. CES Training was praised.
- Needs improvement: TAY provider felt they could connect TAY they were already working with to their own housing faster in the old system; dynamic prioritization was discussed as a possible solution to ensure TAY providers are able better leverage existing connections. Once again there was conversation about changing the way TAY are prioritized equally to all available housing, though no immediate action items were identified. More “how to” guides and simplified processes specifically for HMIS were asked for.

From google forms survey about CE operations (responses summarized):

- Positive: List of access points is helpful to clients.
- Needs Improvement: Access points are not available regularly, and overall confusing system for clients – there should be a client facing interface so they aren’t reliant on Access Points. HMIS is extremely confusing for Access Points. Assessment questions are invasive. Encampment sweeps should not be the time for CE outreach.

Data Evaluation notable items for Q3:

- Access overall continues to improve: per week, assessments increased from 31 last quarter to 43 in Q3; the number of people active in CES increased or maintained in every subregion, with Sonoma Valley in particular increasing almost 300% from last quarter. Individuals and Families both increased the number of active people in CE. This is likely due to increased training and outreach/regional BNL coordination.
- Movement through the system is also speeding up: The average number of days between assessment and referrals has decreased from 257 days in Q1 to 205 in Q3; the average number of days between assessment and permanent housing decreased from 377 days in Q1 to 340 days in Q3.
- Overall, the system struggles with a 32% referral acceptance rate; while some programs with specific barriers are particularly high outliers, not being able to find participants or having participants deny



the offer due to other preferences is a common experience. Dynamic Prioritization will be started to be implemented next quarter with approval of the CoC Board to address this issue.

- People identifying as “unknown” in the race category increased significantly. Operator will provide training this quarter on demographics and shadow major access points to ensure consistent demographics interviewing for this and several other suspected demographics data quality issues.
- Females continue to exit to housing at much higher rates than men for reasons not fully explained by family status.
- Hispanic/Latinx people continue to experience a 7 percentage point disparity in referral acceptance rate, though each quarter has improved slightly.
- After recalculating Total Prioritization Score equity impact, one small but notable disparity was found for Hispanic/Latinx individuals accessing PSH.
- 63% of people in Coordinated Entry fall into the “middle range” of the Total Prioritization Score, which means they will likely receive no housing resource, and are more vulnerable than those in the RRH range receiving housing resources.

Recommendation

None. Information only



**Sonoma County Continuum of Care Coordinated Entry Advisory Committee
Executive Summary**

Item: 5. Coordinated Entry Self evaluation

Date: July 5, 2023

Staff Contact: Thai Hilton thai.hilton@sonoma-county.org

Agenda Item Overview

The Sonoma County Coordinated Entry (CE) policies and procedures state that the Coordinated Entry Advisory Committee (CEA) will complete HUD's CE self-assessment annually. This self-assessment is sometimes required for funding applications. There are seven sections to the self-assessment. Lead-agency and HomeFirst staff will guide the committee through several questions. Based on feedback received from the last meeting, lead agency staff has created a slide deck that will help you understand what each question. Each question will be listed and in red below is information on the local CE system that responds to it.

Recommendation

None. Information only